Aged and Disabled Waiver, Traumatic Brain Injury Waiver and Personal Care Program FREQUENTLY ASKED QUESTIONS

Questions submitted by 5:00 pm on the Monday preceding the provider conference call/Zoom meeting will be addressed on that Friday's call. Responses to questions will remain in draft until addressed on the call and providers have the opportunity to provide feedback.

FAQ	DATE	TOPIC	QUESTION	RESPONSE	ADW	TBIW	/ PC
273	2/4/2022	EVV	I am a new Director and my agency is not yet live with EVV. How can we get training on the system?	Here is the link to HHA's Provider Portal Resource Center: www.hhaexchange.com\wv\ After clicking on the link, scroll down to the middle of the page and click on "Training". Your agency can find some resources there but your agency is also registered to access HHA's Learning Management System (LMS) website where your staff can access many more resources. Someone at your agency should have been set up with a user name and password to access the LMS site. If your agency needs to change or add a user please contact HHA by calling 866-983-4627 or emailing: WVsupport@hhaexchange.com It is your agency's responsibility as a provider to be aware of existing training, to train your staff, and provide them the information needed to access required systems to perform their job duties.	x	x	х
272	2/4/2022	EVV	Is there a specific date in March where all providers will be required to use EVV?	Since we are still resolving Authorization and worker enrollment issues, BMS has decided to push back the deadline when providers will be required to use EVV for billing. BMS will give providers ample notice of the new deadline.	Х	х	х
271	2/4/2022	EVV	When will BMS begin monitoring providers for the limit of 15% for manual entries into HHA?	BMS has not yet set a date to monitor the percent of manual entries into HHA. Providers are still experiencing delays in getting employees uploaded into Gainwell so manual entries are currently still required. BMS will give providers ample notice prior to this edit being activated.	х	x	х

270	2/4/2022	Rate and wage increases	Does the 5% rate increase apply to live-in workers?	Live-in workers are included in the 5% rate increase on 4/1.	Х	Х	
269	2/4/2022	Rate and wage increases	When does the rate increase go to 5%?	The 5% rate increase begins April 1, 2022.	Х	Х	
268	1/21/2022	COVID	My staff is asking if they're required to get vaccinated since the Supreme Court overruled the president's vaccine mandate. How should our agency respond?	The president issued two vaccine mandates. One was specific to agencies with 100 or more employees and it was overturned by the Surpreme Court. The Supreme Court did not overturn the other vaccine mandate that is specific to healthcare facilities that receive Medicare and Medicaid funding. But, CMS has determined that mandate does not apply to HCBS programs. Please see CMS' Q&A below: Q: Does this requirment apply to Medicaid home care services, such as HCBS, since these providers receive Mediaid funding but are not regulated as certified facilities? A: No, this regulation only applies to those Medicare and Medicaid -certified provider and supplier types that are subject to CMS' health and safety regulations. CMS' health and safey regulation do not cover providers of HCBS services.	×	x	х
267	1/21/2022	EVV	I have someone who is training to do in-home care. She has an NPI but it's deactivated. I am starting the reactivation process today, but it could take weeks before it's reactivated. Can she work while we wait for it to be reactivated?	Unfortunately, it is not possible to reactive a NPI number through the NPPES website. Instead, this requires mailing a paper form and it can take weeks to process. The form is available through the website. While waiting for the NPI to be reactivated, the PA can begin working once the required training is completed and the WV CARES background check is done. Please note that until the NPI number is reactivated and the worker is enrolled in Gainwell, claims for services provided by this worker will have to be submitted outside of HHA's system.	×	×	x

266	1/21/2022	EVV	Is there a report that we can run to show if we are compliant with the not more than 15% manual entry requirement?	The Visit Verification Compliance Report provides the percentage of overall compliance for the specified time period. It includes a tab that provides details regarding the visits. This report can be found under "Other Reports" on the drop down menu. There is also an Exception Detail Report under "Exception Reports" header that provides additional useful data for tracking compliance.	х	X	х
265	1/7/2022	EVV	If our agency chooses to have a person that lives with the client use HHA to electronically verify the visit, can we bill using the ADW PA S5130 code, the TBIW PA S5125 UB code, and the PC PA T1019 code?	Yes this is allowed. You will have to obtain an NPI # and enroll the live-in worker with Gainwell. Once Gainwell completes the enrollment, the worker will be uploaded to HHA's system and can be added to the schedule and able to clock in/out.	х	х	х
264	1/7/2022	EVV	If an employee is having problems using HHA, example client's phone line is out, how long can agencies continue to manually clock the employee in and out? Our agency is using a paper verifciation form that was devleloped to verify the times.	Agencies will always have the ablity to manually enter workers' visits, even after EVV is well established. This is necessary because no matter how well the EVV system works, there will be times that a phone is out or something prevents the worker from clocking in/out. Ultimately, the volume of manual entries across all agencies cannot exceed 15% of total visits. In upcoming months, BMS will begin monitoring this and will follow up with agencies that consistently have a high volume of manual entries. BMS will work with the agencies to improve their compliance.	х	x	Х

263	1/7/2022	EVV	When we have a new personal attendant, is there a set time limit we can bill through Gainwell until they are enrolled into HHA?	Eventually, to fully comply with EVV requirements, workers will have to be enrolled in Gainwell's system before services are provided, otherwise the related claims will deny. No date/deadline has been set to have this edit in Gainwell's system. In the meantime, agencies may allow workers to provide servcies as soon as they are trained/qualified and they have been cleared by WV CARES. Please note that if you bill for a worker tht hasn't been enrolled by Gainwell and uploaded to HHA's system, do not put the worker's NPI number on claims because that will cause them to be denied.	x	×	х
262	1/7/2022	Mileage	What will the mileage rate for non-emergency transportation be in 2022? The new IRS mileage rate is \$0.58.5 per mile.	The rate for ADW and TBIW Non-Medical Transportation is not based upon the federal mileage rate. Instead, it is based upon the rate for Non-Emergency Medical Transportation (NEMT). The current NEMT rate is \$0.42 per mile.	Х	Х	
261	1/7/2022	Claims	been denied as being a duplicate. We have	Additional information is required in order to respond to this question. Please contact the appropriate Program Manager: LuAnn Summers for ADW or Teresa	Х	Х	х
260	1/7/2022	Transfers	What is the timeline for new authorizations to be issued when a member transfers?	The process takes approximately three to five business days. For ADW and PC, if you have a specific example that exceeds this timeframe, please contact Melody Cottrell at Kepro. For TBIW, please contact Barbara Recknagel.	Х	Х	Х

259	1/7/2022	EVV	Do PAL's have to match clock-in and clock-out times?	EVV is still in the implementation stage so currently it is recommended that workers that workers clock in/out of the system and also document their hours on the worksheet/PAL. HHA's system captures the actual time that the worker clocks in/out. It's only the billing function of HHA's system that rounds the worker's time to the nearest whole unit. Therefore, the worker's time in HHA's system sould be relatively the same as the times on the PAL/worksheets.	x	x	x
258	1/7/2022	EVV	in times. What do we do if they are scheduled	HHA's system captures the actual time that the PA clocks in and out. If a PA forgets or is unable to clock-in/out, the agency can manually correct the PA's time in HHA's system. For billing purposes, HHA's system creates claims based upon the member's schedule unless the actual time that the PA worked is LESS THAN the amount of time scheduled. In those cases, HHA's will generate claims for the actual time. Gainwell cannot pay for partial units of service therefore HHA's system will round up or down to the nearest whole unit on claims.	x	x	х
257	1/7/2022	MNER	Do agencies still need to get physician signatures on MNER's? We know we do not need to get member signatures during COVID-19.	Initial: MNER'smust have all fields completed, per policy. Annual: BMS requests that under the signature on the MNER, the CM/RN print the member's name and indicate they received verbal consent from the member and the date it was given. ADW/PC/TBIW may use Physician information, including diagnoses, from previous year. Signature Guidance has been provided.	х	x	х

256	12/10/2021	EVV	After enrolling a caregiver and uploading the required documents in Gainwell's system, I was informed by Gainwell's field representative that it will take 30 days for the enrollment to be completed. Is this correct? We were previously told that it takes up to 5 business days for Gainwell to complete an enrollment.	Typically, Gainwell completes caregiver enrollments within 5 business days. On 12/10/2021, Gainwell informed BMS that they are currently experiencing high volumes 5,800 caregivers have recently been submitted. This has caused a backlog but Gainwell is working through it as quickly as possible. If an agency needs to prioritize enrollment of a caregiver, please send the agency name, NPI# and caregiver's name to the BMS Program Manager and they will request that the caregiver be enrolled asap.	х	х	x
255	12/10/2021	Rate and wage increases	Can the 85% of ARPA funds be used to give live-in PAs wage increases or is it only the remaining 15% that can be used for live-in PAs?	Yes, agencies may choose to include live-in workers in the wage increases and other incentives being given to direct-care workers. Increases/incentives given to live-in workers can be counted toward the 85% of the ARPA rate increases that agencies are required to pass-through to direct-care workers.	X	X	х
254	12/10/2021	PERS	I am a CM and I have a newly activated PERS units this week and I know that we are supposed to add this to our service plans. How do we add this service to an existng plan?	The addition of the PERS service can be added to the risk assessment plan, the Service Plan, or be added with Service Plan Addendum form. For TBIW, if the member requests the PERS prior to their next Service Plan meeting, the CM would complete a Service Plan Addemdum and fax it to Kepro.	X	x	
253	12/10/21	EVV	Where can I find HHA's training videos?	Training videos can be found in the Support Center, Knowledge Base located in the upper right-hand-corner of your HHA Provider portal. If you need additional assisstance, contact your HHA Rep.	X	Х	х
252	12/10/21	COVID-19	Regarding the vaccine mandate, does the exemption apply to live-in workers?	No, the exemption does not apply to live-in caregivers. Live-in caregivers provide services to program members (aka customers) and often provide services in the community as well as in the members' homes. These activities place the live-in caregivers at greater risk from COVID than employees that exclusively work from home and have no interactions with others during work hours.	X	X	X

251	12/10/2021	Provider Enrollment	Has BMS made a decision yet on removing the contiguous eight county requirement?	BMS will review requests to serve additional counties outside of the contiguous ruling on a case-by-case basis. Removing the eight contiguous county limitation will be addressed in the upcoming amendment to the current policy manual. Until then, agencies may submit their requests to BoSS (ADW), Kepro (TBIW) and the appropriate BMS Program Manager. Agencies are not to implement changes until they have been approved.	X	Х	
250	12/10/2021	EVV	Some of our authorizations do not match what is in Kepro or Gainwell. PC seems to be consistently one digit off, but the ADW authorization numbers are all over the place.	The variation of authorization numbers is due to EVV implementation. Some authorization numbers viewable in CareConnection are the non-provider-specific authorizations that had to be replaced with provider specific authorizations. Kepro sent the replacement authorizations to provider agencies via email. As members receive new authorizations at the time of their next anchor dates, this issue will resolve itself. In the meantime, please refer to Gainwell or HHA to confirm the correct authorization.	X		х
249	12/10/2021	EVV	When there are two authorizations, our agency is not able to go into HHA to choose the correct authorization when our billing is denied. What should we do?	HHA is currently reconfiguring their system so that all agency administrators can edit the authorization assigned to the visit. This should be accomplished in the near future but if an agency has an urgent need to change an authorization, please notify the BMS Program Manager with the member's name and authorization number. Please also see the user guide included with the documents attached to the email for the 12/10/2021 provider call.	х	X	х

248	12/10/2021	EVV	Our agency has a worker who goes into the clients home at 7:30, leaves at 12:30 and drops off the member at a soup kitchen. How do they clock out after dropping him off if they are using the member's land line? Currently we are entering the clock out time manually.	The mobile app would allow the worker to clock out at the soup kitchen. Assuming this is not an option, the agency will have to continue doing the manual entry for the clock out time.	х	х	x
247	12/10/2021	EVV	Our agency has a worker who is a family member and does laundry for our client, but she does his laundry at her house. How should she use the FOB to clock in and out?	First be sure that the Service Plan includes the laundry service as it is performed. You may be able to consider it an essential errand, or you could enter the worker's address in HHA as a second address so that the worker can more easily clock in/out from that location. By entering the address as a second location, the agency will be able to more closely monitor the worker's activities.	х	х	х
246	12/10/2021	EVV	Our agency needs to order more FOB's. How do we place new orders?	Please send order forms for FOB's to Laura Radcliff at BMS. Her email is laura.g.radcliff@wv.gov. Please note that a separate form must be submitted for each member.	х	Х	х

245	11/17/2021	CPR/First Aid Training	Is the demonstration part of CPR/FA training now required?	The public health emergency was renewed again on 10/18/2021 and will be in effect until 1/16/2022. That means the measures in Appendix K will remain in place until at least mid-July 2022. Virtual staff training will still be allowed and this includes 100% virtual CPR/FA training from an BMS approved vendor. The approved list of vendors can be found on the BMS and BoSS websites. If you would like to request approval of a vendor not on the approved list, please contact BoSS or Kepro. They will be reviewed on a case-by-case basis.	х	x	X
244	11/17/2021	EVV	Our agency uses Co-Pilot. When we submitted billing at the higher rate, Gainwell changed it to the lower rate. Why would they do that?	Claims submitted with the UK modifier will be paid at the regular rate. Also, agencies must enter the temporary/higher rate in HHA's system otherwise claims issued by HHA's system will default to the regular rate.	х	Х	х
243	11/17/2021	ARPA Rate Increases	When did the PC ARPA memo/attestation go out?	The attestation document was sent out on October 15, 2021. The document was sent again on October 29.	Х	Х	х
242	11/17/2021	ARPA Rate Increases	Regarding an ad-pay that our agency received, when reconciling the payment it was incorrect. Who do I contact?	Please send detailed information to Randy Hill and copy the appropriate Program Manager (ADWLuAnn Summers; TBIW and Personal CareTeresa McDonough)	х	Х	х
241	11/17/2021	ARPA Rate Increases	Has there been a decision on how ad-pay dollars can be spent for Lighthouse and/or FAIR employees?	CMS confirmed that ARPA funds may be passed through to state-funded Home and Community-Based services. This allows the funds to be used to increase compensation, benefits, etc. for Lighthouse and FAIR employees but the ad pay dollars cannot be used for programs with other funding sources, including Veterans services and private insurance.	Х	X	х

240	11/17/2021	ARPA Rate Increases	Are there instructions for entering new employees into HHA?	There is no need to manually enter employees in HHA's system. New employees that will be using EVV must obtain a NPI# and be enrolled in Gainwell's system. Once the employee has been enrolled, Gainwell will send the employee's information in an electronic file to HHAX. HHAX will upload the employee's data and create the employee profile in their system.	Х	Х	x
239	11/17/2021	ARPA Rate Increases	Regarding billing, our clerk billed at the old rate. Can she adjust it somehow?	If a payment has already been made, you will need to reverse the claims and rebill at the higher rates. Please ensure that your agency has entered the correct rate in HHA's system.	X	Х	х
238	11/17/2021	EVV	When approving timesheets in pre-billing in HHA, our agency has to approve each one separately. Is there an easier way?	HHA's system will allow agency administrators to approve groups of visits rather than approving each individually.	X	X	х
237	11/17/2021	EVV FOB	Our agency is currently waiting on the FOBs we ordered. What are the next steps once we receive the FOBs?	FOB orders have been processed and the devices will be shipped to agencies by Dec. 1, 2021. Information regarding FOB use will be shared on the Nov. 17, 2021 provider Zoom meeting.	Х	Х	х
236	11/17/2021	EVV	Our agency billed through HHA last week and all were denied. Each claim has two Authorization numbers per client. One Authorization begins and ends on the first of the month and the other begins on the first of the month and ends the last day of the month.	Please confirm the correct authorization number in Kepro's Careconnection. It will then be necessary to edit the member's authorization in HHA's system so that claims will attach to the correct authorization. If you need assistance, please send detailed info to Randy Hill. He will follow up with Kepro and Gainwell as needed to resolve the issue.	Х	X	х
235	11/17/2021	EVV	Our agency is struggling with the HHA system going down 2 - 3 days every week. Our homemakers are clocking in and out but the system is not capturing it and we're having to enter times manually. Is there a problem with HHA?	Please notify HHAX and Randy Hill when you experience this problem.	х	x	х

			If the common has rejorded the direct com	The FVA/ data data consulting the consultants time a in and time			
			If the agency has misplaced the direct-care	The EVV data does verify the worker's time-in and time-			
				out however, it does not provide the required detail of			
			in and out be used to verify the visit occurred?	the tasks that were performed during the visit. In			
		Personal		upcoming months, direct-care workers will be able to			
234	10/29/2021	Attendant		electronically document in HHA's system the tasks that	Х	Χ	X
		Log/Worksheet		are performed and related notes. This will eliminate the			
				need for the paper logs/worksheets. Until then, agencies			
				will continue to be required to maintain the			
				logs/worksheets.			
			If you have a member on hold and their yearly	For members that are in "Hold" status because they've			
			assessement comes due, does the assessment	requested to suspend their PA/DCW services due to			
			need to be done?	COVID, the annual assessment and service plan do need			
				to be completed and reviewed/updated as required. This			
				will help to ensure that services will resume when the			
				member chooses or when Appendix K expires and regular			
				policies for service delivery are again in place. For ADW			
233	10/29/2021	Assessments		and TBIW, CM should confirm during monthly calls that	х	Х	x
	_0, _0, _0	7 100 000 111 011 10		the member's needs are being met through informal			
				supports and determine if the member needs assistance			
				· ·			
				with essential errands such as groceries, prescriptions,			
				etc.			
				Disease also see O.S.A. # 242 researching Hills Idll status for			
				Please also see Q&A # 212 regarding "Hold" status for			
			The ARPA ad-pay for ADW and TBIW is for	members due to unsafe environments. Yes. That is correct.			
			· ·	res. That is correct.			
232	10/29/2021	Rates	April 1st through August 31st and the new		Х	Χ	
			rate is effective in Gainwell as of September				
			1st, correct?				
	40/20/2024	Datas	The ARPA rate increases so far are for ADW	Yes.		.,	
231	10/29/2021	Rates	PA, ADW CM, TBIW PA and TBIW CM?		Х	Х	
			On previous calls we were told that PC DCW's	The PC rate increase was entered in Gainwell's system on			
230	10/29/2021	Rates	would also see a rate increase. Is there a	Oct. 1 and the PC ad-pays for April 1 to Sept. 30 are			Х
			timeline for this?	currently being processed. Additional info is available in			

229	10/29/2021	Rates	Regarding the HHA billing rate, on Monday, S5130 was still the old rate. Are we responsible for changing these?	Yes. Provider agencies are responsible for entering their rates in the HHA system. There are training videos on the HHA website under "Support Center" that provide you	х	х	х
228	10/29/2021	Rates	Regarding the ADW payments that have already been reimbursed, why haven't the full amounts been sent out?	Four ADW agencies have reported that they did not receive the ad-pay for July 1 to Dec. 31, 2020 (additional \$1.00/hr for PA services) These ad-pays have been processed and the four agencies should receive them by Nov. 5, 2021.	х		
227	10/15/2021	COVID-19 Vaccine Mandates	Do the president's vaccine mandates apply to HCBS agency staff?	Two of the vaccine mandates ordered by the president in September could impact Waiver and PC agencies. Rules for these orders are currently in development and not	x	Х	х
226	10/15/2021	Kepro Letters	Can the Kepro letter regarding the PAS appointment be changed? It has incorrect information in it that is confusing to the members.	Changing Kepro letters that are generated automatically by the system is extrememly hard and involves programming and associated cost. Per Melody Cottrell, when RN's call the member to schedule the PAS appointment, they explain that the appointment will not be face-to-face, but rather over the phone.	х	х	х
225	10/15/2021	CareConnection	Is CareConnection still the system being used for all programs?	Kepro is transitioning from CareConnection to ANG (Atrezzo) for client tracking. TBIW was first to use ANG since they were not using CareConnecton, and the other programs will transition at a later undeterminded date. If providers have any suggestions/improvements you would like to see in the new system, email BMS and they will see if they can be included.	х	х	х
224	10/15/2021	Transfer Authorizations	We are waiting months for authorizations on ADW and PC transfers. What can we do?	With the implementation of EVV in March, Kepro had to roll back thousands of existing ADW PA and PC authorizations and replace them with new agency-specific	Х		х

223	10/15/2021	ARPA Rate Increases	If a PA lives in the home, are they not entitled to the recent rate increase?	Although the rate was not increased for PA or PC Direct-Care Worker (DCW) claims billed with the UK modifier, agencies may choose to give wage increases, bonuses, and other incentives to live-in workers. The rate increases that agencies receive for claims for regular/non-live-in workers and Case Management may be used to provide incentives to other staff that provide services to members, including live-in workers and nurses.	х	x	х
222	10/15/2021	ARPA Rate increases	Our PA's are cross-trained in any program. Can we include them in the 85%?	Many agencies cross-train PAs and PC Direct-Care Workers (DCWs) which allows the workers to provide services across a variety of programs including ADW, TBIW, PC, Lighthouse, FAIR, etc. As long as existing workers and new hires are trained and prepared to provide ADW, TBIW or PC services, they are eligible to participate in the bonuses and other incentives offered by agencies using at least 85% of the funds from the ARPA rate increases. Workers that are trained to only provide services that are not Medicaid funded (Lighthouse, FAIR, Meals-on-Wheels, etc.), are not eligible to participate in the ARPA bonuses/incentives. BMS is working with CMS to determine if there are exceptions.	x	x	х

221	10/1/2021	Service Plan meetings	service plan meeting. My question is does this just pertain to new cases? Do you also include annual and 6 month reviews in this as well because usually we have the whole month to schedule these. If it does pertain to them,	Initial assessment/service planning meetings must be scheduled within seven <u>calendar</u> days of the member's enrollment (member's activation in Careconnection) and meeting must be held within 14 <u>calendar</u> days of enrollment. Once the initial plan is in place, it must be reviewed/updated at least every six months. The date of the ongoing six month/annual service plan meetings is based upon the month, not the specific day, that the review is due. i.e. A plan that was developed on 7/14/2021 would be due to be reviewed/updated during	X	
220	10/1/2021	Transfers	When a member transfers to a new PA agency, is the CM required to invite the transferring agency's RN to participate in the receiving agency's initial meeting with the member? If so, is it mandatory that the transferring agency's RN partipate in the meeting?	ADW Policy 501.35 specifies that the receiving agency must complete Section 2 of the Person-Centered Assessment (RN Assessment) within 7 business days of the transfer effective date. It also states that the Service plan must be implemented within 7 business days of the transfer effective date. The Case Manager is not required to invite the transferring agency's RN to the assessment/service planning meeting and the transferring agency is RN is not required to attend. The transferring agency is required to ensure pertinent documentation is uploaded to the CareConnection at least three days prior to the transfer effective dte.	x	

			I was informed this manning by a DN that ba	Dor ADM rolling FO1 20 2 and TRIM rolling F12 10 2			
			I was informed this morning by a RN that he	Per ADW policy 501.20.2 and TBIW policy 512.18.2,			
			was no longer allowed to put fishing on the	community activities documented on the PAL must offer			
			PAL. We have been doing that as long as it is	the member an opportunity to participate and integrate			
			at a public/state park lake. I have several	into their local communities and neighborhoods. The			
			people, men and women on both programs	purpose of community activities is for the member to			
			that like doing this, but can't go without their	have the opportunity to interact with others in their			
			worker taking them.	immediate community and utilize community resources			
				where other individuals engage in community life.			
		Personal		While the ADW and TBIW policies do not specifically			
		Attendant/		prohibit fishing, and depending on where a member lives			
210	10/1/2021	Direct-Care		and how other individuals in the member's community	х	Х	l _x l
219	10/1/2021	Worker		engage in community life, fishing may be an allowable	^	^	^
		Community		community activity, but this is unlikely for the vast			
		Activities		majority of program members. Please consult BoSS or			
				Kepro before including this or similar community activities			
				on a member's ADW PAL or TBIW PA Worksheet.			
				The PC policy pertaining to community activities/essential			
				errands is more restrictive than ADW and TBIW policy.			
				All direct-care services including those provided in the			
				community must relate to ADLs and IADLs and be			
				essential for the member to remain at home. (PC Policy			
				517.16.3) Fishing is not an allowable essential			

218	10/1/2021	Personal Attendant Log	Our question pertains to when there is a change in the PAL outside of the service plan meeting. On page 44 of the new manual in paragraph three, it states: "The case manager is required to document the member's approval of the change in the plan by telephone or in person on the changed PAL under the comment section." To us, that makes it sound as though I am supposed to put my documentation on the actual PAL that has been changed. I wondered, if that is so, am I just to document it on my copy of the changed PAL? I have always just documented the change on my service plan in red, but I can do the other if I am required.	Permanent or minor/temporary changes in the members needs must be documented on the PAL as follows: ADW policy 501.15 states: When the member has a change in needs, the PAL can be changed and attached to the current Service Plan to document any permanent changes. (i.e., change in service hours, types of assistance with the activity, frequency of the activity, destination for community activity or essential errands, etc.). The Case Manager is required to document the member's approval of the change in the plan by telephone or in person on the changed PAL under the comment section. Approved minor daily changes (i.e., worker arrived earlier than scheduled to get the member ready for a doctor appointment) in a member's needs such as hours of service, may be documented on the PAL and does not constitute the need for a permanent change. However, if	X	
217	9/17/2021	ADW Service planning meetings	Who needs to be in attendance at ADW Assessments and planning meetings?	Both the CM and the PAA RN must be in attendance. The CM must contact the PAA RN to schedule a time to conduct the meeting. Per ADW policy manual section 501.15 SERVICE PLAN DEVELOPMENT the meeting must be SCHEDULED within 7 days however you have up to 14 days to complete the plan. Agencies must work together and schedule a time that someone can attend and notify the CM if something would change in the ability to participate. The CM cannot conduct the planning meeting without all in attendance. For personal options this pertains to existing members only as PPL does not have to be present for the initial planning meeting for now.	x	

216	9/3/2021	EVV	My agency still has many members missing in HHA's system even though I have submitted all required information.	Members are uploaded and assigned to provider agencies in HHA's system through the authorizations issued to agencies by Kepro. Currently, HHA's system is unable to upload both authorizations for members that receive dual services. For example, a dual services member's ADW PA auth will successfully upload to the provider agency but the PC auth for that member will not upload. This issue will be resolved in the next few weeks and in the meantime, HHA and BMS will be manually entering the authorizations that have not uploaded. If an agency has missing members that are not receiving dual services, please submit a detailed ticket to HHA and copy BMS. These will be researched/resolved on a case-by-case basis.	х	x	X
215	8/6/2021	Case Manager Qualifications	If a specific Human Services degree is not on the approved list, how do we know if it qualifies?	If your agency wants to hire an individual with a 4 year Human Servcies Field degree that is not on the approved list please provide the following information. A copy of the transcripts and/or course of study required for the degree. If the past work history is relevant, provide that also. Submit this information to the appropriate program manager who will then reveiw the information and make the final decision. Some degrees may then be added to the approved list and some may not as it may always require a reveiw of the course of study if the courses may vary. Past work history will not always ensure approval.	x	x	

214	8/6/2021	Service Plan Reviews	If case management, PC-RN and personal attendant agencies conduct a review in July, what month would the next review be due in? Also what would the Plan Period look like on the Service Plan/Plan of Care-PAL/PAW/Worksheet? (Question adapted to address all programs, was originally an ADW	The plan period would begin in August as you start the 6 month period from August on so plan period would be August - January. The PAL would need to match the SP. Nothing has changed for this with the implementation of the new manual.	X	х	х
213	8/6/2021	Gainwell	I have been using the Gainwell number 304.348.3360 to obtain information regarding payments. It is not working properly.	As for the local telephone number – 304-348-3360 – that number is no longer used for local inquiries to the IVR. It is for internal use only. The portal has been updated and the local number for provider services has been removed. Moving forward, the provider should be calling the toll free number 1-888-483-0793 for telephone assistance from a live associate or to use the automated system (AIVR). Below is the information from the Gainwell portal regarding Gainwell's contact telephone numbers: https://www.wvmmis.com/SitePages/Contact-US.aspx	x	х	x
212	7/23/2021	Closures	When an unsafe environment/non-compliance case has been approved for closure, but cannot be closed during the pandemic, are case managers still required to conduct the CM Assessment?	In cases where services have been suspended and are pending closure due to unsafe environment, Case Managers are not required to continue service planning or conducting assessments. Case Managers are required to continue making monthly contacts with these members and to provide assistance as needed. This includes reporting suspected abuse/neglect, referring the member to services and supports such as Meals on Wheels, DME, etc. PC RN's are not required to make the monthly/annual contacts.	x	x	x

211	7/23/2021	EVV	IHSC's are reporting that patients (members) remain listed as active in HHA even after expiring or transferring. It is my understanding that these reporting's are a result of an upload from Kepro to Gainwell to HHA. Is that correct? If so, why are the profiles not being updated timely?	When a member's authorizations expire or when a member transfers to a different agency, the member's status won't change automatically in HHA's system unless the member is terminated from the program and is no longer active in Gainwell. When members transfer to a different agency and remain active on the program, the previous provider agency can "Discharge" the member from their agency to change the status and remove them from the active roster in HHA's system.	x	х	x
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210	7/23/2021	EVV	As a provider, how should terminated caregivers be handled to cover all agencies (i.e. NPPES, Gainwell and HHA) and allow for claiming and/or adjustments prior to termination date?	When a caregiver quits or is fired, the employer agency must disenroll the worker in Gainwell's system. Once that's done, the data will be sent from Gainwell and uploaded to HHA's system by the next business day. This means the agency is not required to manually terminate the caregiver in HHA's system but you may do to be absolutely sure the worker doesn't access HHA's system during the time it takes for Gainwell's caregiver file to be uploaded to HHA. When a caregiver is disenrolled in Gainwell's system, an effective date is entered and this allows the agency to submit claims and be paid for services provided by that caregiver as long as the date of service is prior to the effective date of the disenrollment. When an agency disenrolls a caregiver, they'll also want to disassociate the worker from the agency in the NPPES website. The method for disassociating the caregiver depends on how the agency obtained their caregivers' NPI numbers. For agencies that designated an Authorized Official (AO) in the NPPES site, the AO will use the modify button to disassociate a caregiver from the agency. This is covered in a FAQ document you can find at this link: https://nppes.cms.hhs.gov/IAWebContent/FAQs.pdf		X	X
209	7/23/2021	CFCM	When will the CFCM suspension for existing members end?	The suspension of the implementation of CFCM for existing members will remain in place for up to six months following the end of the Public Health Emergency (PHE). The PHE was renewed on July 20, 2021 for an additional 90 days.	x	X	x

208	7/23/2021	PERS	Are PAA's required to provide the PERS service?	PAAs are to provide PERS services to their active members that request a PERS unit. Please note that agencies are allowed to bill the full \$50 monthly rate to cover the cost of the PERS unit/monthly monitoring fee and the agency's administrative costs.	х	х	х
207	7/23/2021	EVV	When members need to use a FOB for EVV however, the CMA is not yet conducting face to face visits, does the PAA have to wait to enroll the member for EVV or can someone else install the FOB?	Currently all orders for FOBs are being processed and the devices are to be shipped to agencies in August. Ideally, the CM would install the device in the member's home but currently CMs are not required to conduct face-to-face home visits. Therefore, the PA agency may have their RN or the PA install the device. Similarly, a PC agency's nurse or direct-care worker may install the device. When CMs do return to doing home visits, the CM can verify that the device is properly installed.	X	X	х
206	7/23/2021	Transfers	In the current ADW CareConnection system, when a member requests a transfer of a PAA, the CM is not able to see this. At times the CM is not aware of the transfer until they do their monthly contact. Can anything be done to change this?	Kepro plans to replace the ADW CareConnection with a new system within the next year. Until then, changes to the existing Careconnection are not possible. The Careconnection does not issue a notification to the CMA when a member transfers to a new PAA, therefore the PAA must notify the CM. Agencies may use the notification form on the BMS ADW website that allows the CMA and PAA to notify each other when a transfer occurs.	x		
205	7/9/2021	EVV	If the member authorization is not in HHA and there is no calendar because the CMA needs to request a service continuation due to being beyond anchor date renewal of eligibility, do we wait for auth or create temp schedule?	HHA's system will allow workers to clock in/out even though there is no authorization for services. Agencies may create a schedule while waiting for the service to be authorized but once the authorization is uploaded into HHA's system, the agency administrator may need to reenter the schedule.	Х	Х	х

204	7/9/2021	EVV	If both members are scheduled at the same facility on same day, how will they clock in/out when they won't be home in between visits while accompanying the members.	ADW, TBIW and PC Personal Attendant and Direct-Care services have a 1:1 ratio therefore the worker must clock out after providing service to one member before clocking in to provide service to another member. HHA's system allows workers to clock in/out in the community as well as in the member's home. When a worker clocks in/out in a location other than the member's home, the system will flag the visit for the agency administrator.		x	x
203	7/9/2021	EVV	How do we do in/out if worker has 2 clients in same home and is at Dr. appt with first client which runs into 2 nd clients time? Ex: client 1, 8:00-12:00, client 2, 12:00-4:00. Didn't get back from Dr. appt until 1:30. Does worker clock out @ 1:30 for 1 st client and clock in @ 1:30 for second client, will the worker then work until 5:30 to cover the client for 4 hours or will they end at 4:00 which was the end of regular schedule?	In this scenario, the worker was unable to follow the schedule for the 1st client due to the doctor's appointment. These exceptions to members' schedules are sometimes unavoidable and the worker would continue to provide service/support as needed and then clock out when the appointment is completed. The worker would then clock in to provide services to the 2nd client and depending on the client's needs and the worker's availability, would clock out at the scheduled time or work over. The agency will monitor the hours billed and adjust schedules as needed when these types of exceptions occur.	х	×	х
202	7/9/2021	EVV	In what situation would we assign temp as a temp caregiver because shouldn't all the agency employees be in the system no matter what?	All workers that provide ADW and TBIW PA and CM services as well as PC Direct-Care workers are required to be enrolled with Gainwell and uploaded into HHA's system. This allows the workers to clock in/out using EVV. Agencies may assign or schedule temp or back-up workers prior to a visit or the assignment/schedule may be created following the visit.	Х	x	х

200	7/9/2021	Transfers	We are running into an issue with members who are transferred. It is taking a very long time for them to show up in Gainwell. We have tried to get around this by entering a temporary service, and when the service is provided, we have to delete the temporary visit and add the actual service. This seems like	BMS is working with BoSS and Kepro to shorten the processing time for transfers and related authorizations to the new agency. Rather than creating the temp service, the "transfer-to" agency should contact BoSS and/or BMS if there's a significant delay the transfer being processed.	X	X	x
199	7/9/2021	Closures	We submitted a case for closure and as the CM, we were told to continue to contact them even though they're not receiving PA services, but we cannot close?	Until the COVID-19 public health emergency ends, CMS requires cases to remain open unless the member passes away or voluntarily chooses to be disenrolled from the program. CM agencies should continue to contact the member to monitor health & welfare and link to other services/supports as needed. Although PA services may not be provided as originally planned, agencies may still be able to support the member by performing essential errands.	х	х	х
198	7/9/2021	EVV	With the new electronic billing through the EVV system, will we need to enter each day, even for one person who works the same schedule for the same member each month?	It is planned that HHA will implement the billing function of the EVV system in September. In July and August, HHA will conduct training and testing of the billing function with agencies. As workers clock in/out and the system records visits, agency administrators will approve the visits to be billed. The approved visits will automatically be submitted as claims to Gainwell on a daily basis.	x	x	х

197	7/9/2021	Agency Certification	Regarding limitations on the number of counties served, will the eight contiguous county limit be removed? And will it be for PA agencies too?	In response to feedback from CM and PA agencies, BMS plans to remove the limit on the number of counties that an agency may serve. This will require the policy manuals to be updated and posted for a 30-day public comment period. This and other changes to the policy manuals will be made in the upcoming months.	X	Х	
196	7/9/2021	EVV	Is there a timeframe to enter visits manually? Can it be the next month?	There is no timeframe or deadline for agencies to manually enter a visit in HHA's system. However, it is recommended that agencies enter visits and make necessary corrections to visits as soon as possible following the date of service.	х	х	х
195	7/9/2021	EVV	To access EVV, do you need an NPI number?	All workers that provide ADW and TBIW Personal Attendant and Case Management services as well as PC Direct-Care services are required to be enrolled with Gainwell. Each worker must have an individual NPI number in order to be enrolled. The worker's NPI number is the unique identifier in both HHA and Gainwell's systems and this ensures there is no duplication of billing across programs and/or members.	х	x	х
194	6/25/2021	Non-medical Transportation	Is there any plan to increase the mileage rate for travel?	The travel reimbursement rate for the waiver programs is consistent with the NEMT rate. There is no plan to increase the rate at this time.	х	Х	
193	6/25/2021	CFCM	Can we expand to other counties to offer Case Management services?	The limitation on agencies serving "no more than 8 contiguous counties" will be removed when the policy manuals are updated in the upcoming months. In the meantime, if your agency is considering expanding to additional counties, please contact LuAnn Summers (ADW) or Teresa McConough (TBIW) to request an exemption to the current policy.	Х	X	

192	6/25/2021	CFCM	What is BMS' plan for CMA providers that can't make money doing just case management? Some are deciding not to provide case management services any longer.	BMS is currently searching options to increase rates and reduce unnecessary restrictions for Case Management services.	Х	х	
191	6/25/2021	CFCM	A dual services member chose our agency for PC services and there are only 2 case management agencies in the area. Who decides who gets this member?	Members have the freedom to choose service providers. Conflict-Free Case Management is on hold for existing members but new members and those that voluntarily request to transfer to a different agency are required to choose a Case Management agency that is not conflicted with the agency/agencies that provide waiver Personal Attendant or Personal Care services. In a county where there are two provider agencies, one would provide CM while the other provides PA and PC services. If this is not possible due to the member's needs or the agencies' ability to meet the member's needs, please contact BMS to request an exception.	х	х	х
190	6/25/2021	CFCM	We are a small agency and may only have one case manager. The CFCM requirement to have different staff for cases that are conflicted, that is going to be hard for us.	Since CFCM probably will not be enacted for quite some time, those requirements are not in place for now. However, when CFCM is enacted, policies will have to be followed.	Х	Х	
189	6/25/2021	CFCM	Regarding CFCM, if the PA agency doesn't have staff but our agency that provides both CM and PA services does have staff, can we accept/keep a member?	Please keep in mind that Appendix K suspends the requirement for existing members to comply with Conflict-Free Case Management. This means that existing members may continue to receive all services through a single agency. For new members and existing members that voluntarily request to transfer, BMS will approve all services to be provided by a single agency if there's no other agency in the area that can provide staff to meet the member's needs.	Х	x	

188	6/25/2021	COVID-19	Is it a HIPAA violation to ask someone if they have been vaccinated?	It is not a HIPAA violation to ask an employee or a program member about their COVID-19 vaccination status. However, agencies must be prepared to explain why this is being asked and what will be done with the information provided. Information is available through the following link: https://www.hipaajournal.com/is-it-a-hipaa-violation-to-ask-for-proof-of-vaccine-status/	x	x	х
187	6/25/2021	Forms	On the Word version of the Assessment form, it states that we are not to change anything on the form. Can we change boxes or unbold certain areas, for example?	You may make additions and/or formatting changes to the forms but cannot remove information already on the forms.	X		
186	6/25/2021	Forms	We are having a very hard time with the new CM Assessment and Service Plan forms. We cannot copy and paste and it is taking a very long time to enter all of the member information again in the new forms.	PDF and Word versions of all forms are available through BMS' website The word versions allow users to copy/paste member data into the new Assessment and Service Plan documents	х		
185	6/11/2021	EVV	For new clients, who is responsible for getting them in HHA?	Once applicants/members are activated and receive an authorization from Kepro, the information should be automatically in the system.	Х	Х	х
184	6/11/2021	Member Enrollment	Our agency is waiting on a couple of applicants to be enrolled. Will they go past July?	If the applicant has a slot, DHHR/BoSS will keep working to enroll the applicant. The goal would be to provide services before July 1 to be able to be counted as a slot, however if that does not happen, they will be counted for the next FY.	X		
183	6/11/2021	PERS	Regarding the PERS unit, if someone passes away or moves or transfers to another agency, who is responsible for getting the unit back? If it was in the agency's name, we could be charged up to \$200 if we can't get it back.	The agency would be responsible for retrieving the PERS unit. BMS would suggest possibly having a member agreement up front explaining that if they leave your agency, they must return the unit or make arrangements to allow an agency staff to retrieve the unit.	X	X	

182	6/11/2021	Rates	Has there been any more discussion about increasing the rate for case managers?	BMS has received large amounts of feedback regarding the increase to \$90 not being adequate. BMS understands the increase in responsibilities for ADW case managers with transfers, quarterly visits, travel, etc. For some members, within their service plans, they may require more frequent home visits, but visits will be required at least quarterly. TBIW CM rate is higher than ADW due to monthly home visits still being part of the requirement for CMs. Depending on how the rate	x	X	
				increase is determined, TBIW may also have a rate change. This is still under review. Any increase would be retroactive to April 1.			
181	5/28/2021	PERS	When are PAA agencies required to start providing PERS services?	There is no deadline. Agencies are currently researching potential PERS vendors and are encouraged to begin offering the service as soon as possible.	Х	Х	
180	5/28/2021	PERS	the agency responsible for offering PERS for ADW CM clients, or is it ADW PA clients? I was under the impression it was PA but then on a recent call, it sounded like it was PA.	Since PERS is a service, it would be viewed as a conflict if provided by the Case Management agency. Therefore, the PA agency is responsible for offering the PERS service. The PERS is not a mandatory service, members may choose to have the service in order to increase their	х	х	
179	5/28/2021	EVV	When a PA does essential errands for the member, does she have to clock out of EVV and then clock back in when she gets back from the errand?	Since policy allows PAs to bill for performing essential errands, the PA would not clock out to perform the errand. Occasionally, PAs work more than one shift per day with a member—a split shift—and in those cases, the PA would clock out and then clock back in later in the day to work the remaining shift. To promote independence and community involvement, members should participate in their essential errands whenever possible but due to COVID-19, many members are still choosing to remain home while the PA performs errands.	x	x	х
178	5/28/2021	PERS	Can the PC program also get PERS units?	Currently, PERS is not a service offered through the PC program.			х

177	5/28/2021	COVID-19	What if a personal attendant or member refuses the vaccine?	For various reasons, some Personal Attendants and members may not get vaccinated. For their protection, agencies can continue virtual meetings, assessments, and service planning. Recent CDC guidance dropped mask requirements in most settings for vaccinated people but when face-to-face visits are eventually reinstated, agency staff may choose to wear PPE and take precautions when working with members and others that are not vaccinated.	х	x	Х
176	5/28/2021	EVV	We received a list of Authorization Codes from Kepro but some don't match. What do we need to do?	The implementation of EVV required Kepro to create new authorizations for ADW and PC services for March 1, 2021 and later. These new authorizations were emailed by Kepro to the provider agencies. Please contact Kepro if you have not yet received them. When submitting ADW and PC claims with dates of service March 1 or later, agencies must use the new authorization numbers on their claims. Claims with dates of service March 1 or later will be denied if submitted with with the original authorization number.	х		х
175	5/28/2021	EVV	For Personal Care clients, who installs the FOB, the nurse?	The PC nurse will be responsible for installing the FOB since there is no Case Manager required for PC services.			х
174	5/28/2021	EVV	Where do I sent the FOB order form?	Please email completed FOB order forms to Randy Hill at BMS. Randall.k.hill@wv.gov	Х	х	х

173	5/28/2021	COVID-19	Our agency believes they received the 0.25 cent per unit payment however, the deposit we received from Gainwell, did not reimburse for the full amount. What should the agency do?	Gainwell is issuing the \$0.25 per unit (\$1.00 per hour) payment separately for each program. ADW payments were the first to be issued, followed by PC payments and TBIW payments will soon be released. It has been determined that the ADW payments were miscalculated and BMS is currently working with Gainwell to issue supplemental ADW payments to correct the error. If an agencies identifies an error with any of the payments, please notify Randy Hill.	х	x	x
172	5/14/2021	Eligibility	If a member's Medicaid card has expired, can they still receive PC services? I know coverage was extended due to the pandemic but not sure if this is still happening.	At this time, DHHR is not closing cases/discontinuing coverage. Members should be encouraged to renew their Medicaid coverage as soon as possible but PC (and Waiver) services may continue to be provided.	Х	Х	х
171	5/14/2021	EVV	Our agency had an employee quit because her husband was worried EVV would track her with the tablet our agency provided. A few days later, the member who she cared for called and said they were going to transfer to another agency and the worker was going with them. We asked about the concern over EVV and the member stated she would not be	EVV is mandatory for all Homemakers and Direct-Care workers that do not live with the member. It's possible that the new agency plans to have the worker enter visits using the member's landline or a FOB. It's unfortunate that no matter what facts and assurances are provided, some workers continue to believe false theories about EVV.	х	х	х
170	5/14/2021	EVV	In the HHAeXchange site how can you tell if the patient is a Personal Care patient or a ADW patient? I of course know which of my patients are which – but I'd like to know if they are in the system correctly – and I have one patient who is Personal Care with our agency and ADW with another agency. Since only my ADW patients are in the system and this one Personal Care patient is showing and no others – I don't know how to tell if they have her as a Personal Care client for me and not ADW.	In HHA's system, you can identify what services are approved for a member by checking service codes in the members' authorizations that are uploaded from Gainwell.	х	x	х

169	5/14/2021	Rates	Since Appendix K has been approved, when will we receive the \$1 supplemental rate increase?	The retroactive \$1/unit rate increases for July 1 to Dec. 31, 2020 were processed by Gainwell last week and agencies should have received the payments this week.	Х	х	х
168	5/14/2021	EVV	The EVV system shows the caregivers' whole social security numbers plus their full names and dates of birth. It would be so easy for someone to steal their information. Once entered, can this data be hidden? Usually only the last four digits of the social security number is shown.	Agencies can limit the information in HHA's system that can be viewed by specific user types. For example, if you want only your Administrator users to be able to view the workers' SSN or birthdate, you restrict this information by setting the permissions for other users. HHA's support team can assist but it's a simple edit. The link below is to a job aid that explains how to assign and remove permissions for user roles: https://s3.amazonaws.com/hhaxsupport/SupportDocs/Enterprise/Job+Aids/Enterprise+Job+Aid+-+Creating+New+Users.pdf	х	x	х
167	5/14/2021	CFCM	I just need clarification on the 4 year degree in an approved Human Services field. Does this still require a temporary Social Work License or do you just need to complete the online training?	Under the present policy manuals, Case Managers are not required to be licensed. Individuals with a temporary Social Work license can provide Case Management services if they meet the requirement of a 4 year degree in a Human Services field and complete the online Case Management Certification training.	х	X	

166	5/14/2021	EVV	CMS is requiring the FOB to be installed by an entity that is separate from the agency that provides the service that is tracked through EVV. Once CM begins using EVV for home visits, how would CM be considered a separate entity?	The 21st Century CURES Act mandates that EVV is used to track Personal Care/Personal Attendant services provided by a worker that does not live in the member's home. WV has chosen to require Case Managers to use EVV when conducting face-to-face visits in the members' homes. Ideally, an entirely separate entity would carry out the simple installation of the FOB devise in the homes of members that are unable to have workers clock in/out through the preferred mobile app or landline methods. But, this was not feasible therefore the Case Manager was chosen to perform this task. Most Case Managers will choose to use the mobile app for home visits even though a member may have a FOB that's used by the PC/PA worker.	х	x	х
165	5/14/2021	CFCM	I understand as of April 1 2021 we can start billing \$90 monthly for CMS, so if a service plan was done then (April) we would do the next one in 3 months?(July) Would the PA agency also be on the phone call in 3 months doing their part as well or is just the CMS? I have talked to several of them about this and they had no clue about it.	A new service plan does not need to be done at each quarterly visit. Service plans are required annually and are to be reviewed/updated within six months. The additional quarterly visits allow the Case Manager to more frequently observe the member and monitor health and welfare. The Personal Attendant nurse is only required to be present at visits when the service plan is created/updated. Due to COVID, face-to-face home visits remain optional but Case Managers are required to contact members virtually/by phone each month.	x		
164	5/14/2021	COVID-19	Regarding the vaccine, is it going to be required?	BMS is not mandating that members or agency staff must be vaccinated but will continue to follow the directives issued by the Governor.	Х	Х	х

163	5/14/2021	COVID-19	Is there a time estimate of when face-to-face meetings will resume?	Under the current Appendix K, face-to-face visits remain optional but agencies report that they are returning to face-to-face visits as their Case Managers and members are fully vaccinated. The end-date for this and other COVID-related policy exceptions in Appendix K is "six months after the public health emergency has ended." Depending on WV's rates of infection, vaccinations, etc., BMS may choose to reinstate the requirement for face-to-face visits sooner than required by Appendix K, but will	х	х	x
				give agencies adequate advance notice before doing so.			
162	5/14/2021	EVV	If the CM installs the FOB, the member transfers and then a new member does not utilize a FOB, what then?	If a member no longer needs a FOB, it is to be returned to BMS. This would also apply if a member passes away, leaves any program requiring EVV, etc. BMS will put together a Fact Sheet to cover processes not covered in HHAX's User Manual.	Х	х	Х
161	5/14/2021	EVV	Can a member refuse to have a FOB installed in their home?	Agencies should explain to members that the FOB is a small device, it does not have a camera or other means of monitoring the member, and can be installed so that it is inconspicuous. However, if a FOB is the only means of utilizing EVV and a member refuses to have it installed in their home, please contact BMS and we will review these on a case-by-case basis.	х	х	х
160	5/14/2021	EVV	Regarding the FOB's, are they installed in every members home?	FOBs are only to be used when the mobile app or member's smart phone are not an option for accessing EVV. I Fob's should not be ordered as a back-up for when these other methods are temporarily unavailable (worker forgets smart phone, member's landline is not in service, etc.) Agencies should have a plan for these occurrences. Having the worker document the hours worked and subsequently manually entering the info in HHA's system is sufficient.	х	х	х

159	5/14/2021	EVV	If a member transfers, is the CM responsible for revising the FOB information?	If a member transfers, the FOB remains in the member's home. The new Personal Attendant agency may not require the FOB but if so, the new agency will be responsible for associating their worker with the member once the new agency's authorizations are uploaded from Gainwell to HHA's system.	х	х	х
158	5/14/2021	EVV	Does the CM order the FOB's?	The form does require some information from the PAA, so the CMA and PAA will need to work together to complete it. Either the CMA or PAA can submit the completed form to BMS.	Х	Х	х
157	5/14/2021	EVV	If we're not yet conducting face-to-face meetings with members, do we still need to install FOB's?	No. Installing FOB's is not required until face-to-face visits with members are reinstated. If your agency is doing face-to-face visits with some of your members, you may go ahead and install the FOB for those members but this is not required.	Х	X	х
155	4/30/2021	EVV	Since our caregivers are still not in the HHAeXchange yet and neither are our PC clients, for billing, do we use the UK modifier for live in workers?	Effective with services provided on/after 4/1/2021, agencies are to bill for services provided by live-in workers using the service codes with UK modifiers. Services provided prior to 4/1 by live-in workers will continue to be billed without the UK modifier. It is not necessary to wait for members or workers to be uploaded to HHAX before billing with codes that have UK modifiers.		X	Х
154	4/30/2021		Do we start using the A0160 code with the U5 modifier for ADW transportation at the new 42 cents a mile rate for April billing purposes?	Yes, the new codes and fees began on April 1, 2021.	х		
153	4/30/2021	Case Management	Do we start using the G9002 code with the U1 modifier for ADW Case Management billing for April and I assume you will tell us the rate?	Yes, the new ADW codes and fees began on April 1, 2021. The fee for CM will remain \$90 for now however, it is being reviewed and will be changed. The rate change will be announced asap and is planned to be retroactive to April 1, 2021.	Х		

152	4/30/2021	Transfers	For ADW, if transferring current CMA to different CMA and both steps are done in Careconnection, does email need to be sent to BOSS also?	Yes, BoSS will need to be notified of all types of transfers. A written transfer process guide is currently being developed.	Х		
151	4/30/2021	Transfers	If transferring a participant to a different PAA, and the current PAA goes into Kepro's Careconnection and does the transfer process to select the chosen PAA, and CMA uploads the selection forms to the Careconnection, should an email be sent to BOSS also?	Yes, BoSS will need to be notified of all types of transfers. In the case of a transfer to a PAA agency, BoSS may need to complete the transfer in CareConnection as the CM will not be able to. A written transfer process guide is currently being developed.	х		
150	4/30/2021	EVV	Since we list attendants using the FOB would an attendant not listed not be able to utilize the device? i.e. Sub provider?	The FOB ordering form requires agencies to enter the names of workers that will be using the device to clock in/out at the member's home. It is not a problem if a worker is accidentally left off the form, a different worker subs for the regular worker, or if a new worker is hired after the form has been submitted.	X	x	х
149	4/30/2021	EVV	If we used a scheduling system that wasn't prepared for HHA as aggregator and we chose the free service, can we change if the company we used can send the required information to HHA?	Agencies that have chosen to use HHA's free EVV solution may change to a different EVV vendor. Before making this change, agencies should share HHAX's file specifications with the potential new vendor to ensure the new vendor can submit EVV data as required. HHAX's file specifications, testing requirements, etc. are available on HHAX's website and agencies are encouraged to contact HHAX for technical assistance before proceeding with the change to a different vendor.	x	X	х
148	4/30/2021	EVV	My worker's call in/out are not registering in HHA Exchange or will give an invalid message. I still have client's not loaded, have emailed DHHR and HHA exchange and have been told these issues are fixed or will be fixed. Our concern at Wirt County COA is that we will be dinged for non-compliance for these issues.	There will not be penalties to agencies that have not yet been able to use the EVV system because their caregivers and/or members have not been uploaded to HHAX's system.	Х	х	х

147	4/30/2021	EVV	I do not understand why CMA would need to install a FOB that the PAA is requesting, why not have the PA/RN complete the form and install the FOB?	In general, CMS requires the FOB to be installed by an entity that is separate from the agency that provides the service that is tracked through EVV. Having the CM install the FOB reduces the risk of fraud.	Х	Х	
146	4/30/2021	EVV	Are other Medicaid reimbursable services subjected to a Time Tolerance Window?	The time tolerance window deals with the clocking in and out of workers that are required to use EVV. The 21st Century CURES Act requires EVV for only certain HCBS services. EVV is not required for other Medicaid reimbursable services therefore the time tolerance window does not apply to those services.	х	x	х
145	4/30/2021	EVV	The FOB order form indicates that the mobile app and member's landline are not available options before a FOB can be requested. Shouldn't a FOB device be utilized in all houses? What happens if an DCW loses their phone or it is stolen and client information is on it? Our policies prohibit client information on mobile phones. Will BMS and/or BOSS provide new policies and be responsible for any breaches?	This is a good question but it is not necessary to have a FOB in every member's home as a back-up in case a worker is unable to clock-in/out as usual using the mobile app or member's landline. Should a worker's smart phone be lost or not available, the agency administrator can manually enter the worker's time in the EVV system. This is expected to occasionally happen and agencies should have a plan/process for these occurrencesi.e. document hours worked on a timesheet, etc. Please note that HHAX's and other qualified EVV vendors' mobile apps are secure and no protected information is stored on the worker's phone.	x	x	Х

			T	1			
			Does the FOB Form have to be updated every	It is not necessary to update the FOB request form when a			
			time a member transfers to a new agency?	member transfers to a different PA agency. When a			
				transfer occurs, the FOB remains in the member's home.			
				Kepro will end-date the existing PA agency's authorization			
				and issue an authorization to the new agency. The change			
144	4/30/2021	EVV		to the existing auth as well as the new auth will be	Х	Х	l _x l
- · ·	., 50, 2021			uploaded to HHAX's system so that the member will be	, ,	,,	
				reassigned to the new PA agency. This will allow the new			
				agency to create the member's schedule and assign the			
				workers to the member without having to update the FOB			
				form.			
			Will CM get training to install the FOB?	FOB's are installed using a simple zip-tie type apparatus			
				that will attach to a drawer handle, refrigerator handle,			
143	4/30/2021	EVV		etc. A learning guide for FOB use is available on HHAX's	Χ	Χ	Х
				website.			
			If all of our clients are not in HHA, should we	It is not necessary to wait until all members and			
			go ahead and start with the ones that are in	caregivers are uploaded to HHAX's system before			
			HHA? Or wait until they are all in?	beginning to use EVV. Agencies are encouraged to begin			
142	4/30/2021	EVV		using the system as soon as possible and initially having	Χ	Х	х
				only some workers using EVV will allow agencies to			
				benefit from "lessons learned" before having all workers			
				use the system.			

			How does offering a Life Line work and have	The Dersonal Emergency Despense System (DEDS) :			
			How does offering a Life Line work and how	The Personal Emergency Response System (PERS) is			
			does an agency get reimbursed	available to members that need and choose to have the			
				device. The CM is responsible for documenting the PERS			
				on the member's service plan and the PA agency is			
				responsible for providing the member with the PERS unit.			
				PA agencies must choose a vendor that offers PERS which			
				meet policy requirements. The PA agency will claim for			
				the actual cost of the vendor's monthly monitoring for the			
141	4/30/2021	EVV		PERS.	Х	Χ	
				Please note that there are two types of PERS vendors;			
				those that provide the equipment at no cost but charge a			
				monthly monitoring fee and those that sell the equipment			
				for a fixed price but charge no monthly monitoring fee.			
				The PERS service available through the ADW and TBIW			
				covers the cost of the monthly monitoring (up to			
				\$50/month) but does not cover the initial cost of			
				purchasing the PERS equipment.			
			If we have a client that has two workers and	Yes, you may choose to have the one enrolled worker			
			one worker is enrolled and in Gainwell and	begin using EVV while waiting for the other worker to be			
140	4/30/2021	EVV	one isn't, should we go ahead and schedule	enrolled with Gainwell.	Х	Х	Х
	, ,		visits for the days the enrolled worker is on				
			the schedule?				
			We have 9 of our Personal Care clients not in	Kepro, Gainwell and HHAX continue to work through			
			HHA. Is there a timeline of when this will be	authorization issues that prevent members from being			
139	4/30/2021	EVV	fixed?	uploaded to HHAX's system. At this time it is not possible	Х	Х	Х
	, , -			to give a specific date that these issues will be fully			
				resolved.			
			Please clarify whether a caregiver's NPI	Until Gainwell completes the enrollment of existing			
			number has to be issued before they can	workers through the bulk enrollment process, agencies			
			provide services for participants.	may continue to submit claims without the worker's NPI			
138	4/30/2021	EVV	p. c. i.s.c services for participants.	number. Agencies will be informed in advance of	Χ	Χ	Х
				Gainwell requiring the worker's NPI number on claims.			
				Janiwen requiring the worker 3 Wi Findinger Off Claims.			
\Box							

137	4/30/2021	EVV	Should agencies manually enter their workers in HHA's system or do we wait for Gainwell to enroll them?	Agencies that have submitted their workers to Gainwell through the bulk enrollment process should not manually enter their workers in HHAX's system. Please wait until Gainwell has enrolled the workers. Once this is accomplished, the workers will be uploaded to HHAX. Manually entering the workers will result in duplicates	х	X	х
				that will need to be deleted from HHAX's system.			
136	4/30/2021	Forms	Please explain when the new ADW worksheets need to be implemented.	ADW agencies may begin using the new forms on April 1, 2021. However, agencies may continue to use the previous forms until November 30, 2021. For example, if a member's annual meeting is in July, the agency may choose to wait until that time to switch to using the new forms.	х		
135	4/30/2021	BMS	We have begun using the new ADW forms even though we ae aware there may be edits or corrections to them. Is this okay?	Yes, agencies may begin using the new forms on April 1. If changes are made to the forms, the revised documents will be distributed to agencies and posted on BMS and BoSS websites.	х		
134	4/30/2021	Electronic Records	Who approves the use of electronic records for Personal Attendant services? We have duplicated documentation - paper and electronic - for four years and no one at BMS seems to have the authority to say we can quit paper handwritten documentation.	HCBS programs do currently allow agencies to have electronic record systems. It is the agency's responsibility to ensure the electronic documentation contains all information required by policy. It is not necessary for agencies to maintain dual electronic and paper documentation but agencies must have a secure back-up for electronic documents in case of system failure or disaster. Agencies that have electronic records must have a process/plan for making documents readily available to BoSS nurse monitors and others as needed.	x	x	x

129	4/30/2021	EVV	How are back-up workers documented?	If the agency knows who the back-up worker will be, the worker should be entered in the system and associated with the member. If an unplanned back-up worker is assigned to work with a member, the worker will be able to clock in/out but the agency's system administrator will be required to make adjustments in the system.	X	X	х
130	4/30/2021	EVV	If a worker arrives, clocks in, but then drops off the member somewhere at the end of their shift, how does the worker clock out?	Workers may clock in or out from locations other than the member's home but these visits will be flagged in HHAX's system. If a worker will regularly be clocking in/out from another location, the agency should add the other address to the member profile in HHAX's system. This will allow the worker to choose the correct location when clocking in/out.	Х	X	х
131	4/30/2021	Training	Will TBI remove the EVV training requirement as well?	Yes. The revised Training Log is now on the BMS website for TBI Waiver.		Х	
132	4/30/2021	Training	The "Extreme Safety Guide" was created in 2015, As nurses we generally do not use any information if more than 5 years old. So, can the "Guide" be updated.	The Extreme Safety Guide was developed by an ADW Quality Council Committee with input from law enforcement, APS, CM's, RN's, agency admin staff, member, behavioral health (mental health) and substance use disorder experts. It is a comprehensive guide and the information it contains is current and relevant. Please contact BoSS if you have recommendations for changes to the guide.	х		
133	4/30/2021	Authorizations	If providers have not been issued the agency specific authorizations prior to their March Billing and they can no longer obtain these authorization from Kepro through Care Connection, how do they process claims without these authorization?	Kepro is currently sending the new agency-specific ADW and PC authorizations to providers via secure email. Please contact Kepro if you have not yet received your new authorizations.	х		х

128	4/30/2021	EVV	What if the back-up worker uses the FOB?	A back-up worker should have no difficulty clocking in/out using a FOB. Each worker has their own user ID and the FOB device is independent from the worker. The agency makes the association of the worker to the member.	х	х	х
127	4/30/2021	EVV	What parameters will be set for the Tolerance Window?	BMS can set the Tolerance Window as tightly or loosely as BMS chooses. Currently it is not activated, but when it is turned on, providers will receive flags when someone clocks in or out, outside of the window. The system does round up or down, so it could affect billing. BMS will need to discuss further with HHA and updated information will be shared as the implementation date gets nearer.	х	х	Х
126	4/30/2021	EVV	Once the Tolerance Window is set, how will agencies be monitored if workers are outside of the window?	The timeframe for the tolerance window will be incorporated into the monitoring/review process. For example, if the tolerance window is set at 8 minutes, the system will not flag the time in/out unless it is 8 or more minutes earlier or later than the worker's schedule arrival/departure time. Similarly, the BoSS and Kepro reviewers will apply the same tolerance window if the PAL indicates a discrepancy of less than 8 minutes.	х	X	х
125	4/30/2021	EVV	Is installing the FOB a billable service?	No, the FOB is required for administrative purposes therefore its installation is not a billable service. It is recommended that the FOB be installed by the CM during a routine scheduled visit with the member.	Х	Х	х
124	4/30/2021	EVV	I have some questions regarding claims not being paid due to member's having Medicare?	An edit in Gainwell's system is causing payments to be "withheld" for members that have Medicare or private insurance. Gainwell has been informed that this edit should not be applied to claims for ADW, TBIW or PC services. They are currently working on removing the edit and in the meantime, agencies may want to hold on submitting additional claims for members that have encountered this issue.	Х	X	Х

123	4/30/2021	EVV	Is there training available, recorded or written, on how to enroll workers in Gainwell's portal?	Gainwell provides regular webinars each month and information on worker enrollment is available. Dates and other information regarding the webinars may be obtained from your agency's assigned field representative. The webinar information is also included on the field representatives' emails.	х	x	Х
122	4/30/2021	EVV	Are there any updates regarding the temporary rate increase from July 1 to December 31, 2020?	This rate increase has been requested through Appendix K which CMS must approve before the funds can be distributed to provider agencies. BMS will keep agencies informed on the status of the rate increase payments.	Х	Х	х
121	4/30/2021	EVV	If some, but not all workers are in HHA, should our agency start EVV?	It is the agency's decision if they want to proceed with EVV. Your agency could begin using EVV with the employees who are in the system to learn how EVV functions. You are not required to wait for all employees to be in the system. It should not create any issues if your agency would choose to do so.	х	x	Х
120	4/30/2021	Training	What is the 'Safety Training' that was mentioned?	The ADW program has added in the new manual, an initial Safety Training requirement for personal attendants. It is the Extreme Situations Guide (for ADW). The Guide is located on the BMS website, not the LMS website. The training will not be added to the LMS website. The Guide does include a test however, BMS will not be requiring it however if the agency wants to use it they may. Documentation indicating the Guide was reviewed is all that will be required for staff. For existing PA staff, this training can be done when other training requirements are due.	x		

119	4/16/2021	EVV	What is the tolerance window for HHAX's system? If a worker clocks in within the tolerance window, will BoSS and Kepro accept the same window of time when reviewing the PAL? For example, worker clocked in at 8:05 a.m. but PAL indicates worker began providing services at 8:00 a.m.	Currently the tolerance window is set at 999 minutes so that workers can clock in/out early or later than scheduled without the agency administrator having to approve or make corrections. Prior to implementing the claiming function in HHAX's system, the tolerance window will be reducedpossibly to 7 minutes. In the meantime, each agency can set the tolerance window to their preferred number of minutes.	х	х	Х
118	4/16/2021	EVV	I have a question for Gainwell for Friday's meeting. When the site issues be fixed so that we can bill? This is week 3 of same issues. Can't even log in.	The issue that was pending/denying claims for members that have Medicare or private insurance has been resolved. It is not necessary to obtain a denial from Medicare/private insurance prior to submitting claims to Gainwell for waiver or PC services. Kepro is assisting agencies that are having issues with the new agency-specific authorizations for ADW PA and PC services. These authorizations replaced the previously issued authorizations from March 1, 2021 forward.	x	X	х
117	4/16/2021	Claims	How will be be reimbursed for denied claims from Gainwell?	Gainwell is tracking this so agencies do not need to follow- up. BMS is checking on this to find out if agencies will be reimbursed in one lump sum or per claims.	x	Х	х
116	4/16/2021	Case Management Assessment	I may be overlooking it, but I do not see the option to document the date the assessment was provided to the member on the new CM Assessment	BoSS is adding this to the CM Assessment. This form, and other forms that were revised after they were emailed to providers on March 31, will be emailed to all providers.	Х		
115	4/16/2021	New Forms	Will forms be available as PDF's?	Yes. As soon as the new forms are finalized, they will be added to BMS's website.	Х	Х	
114	4/16/2021	Rates	Do you have an idea when the \$1 supplemental payment for ADW and PC services between 7/1/2020 - 12/31/2020 will be paid to providers?	BMS cannot begin processing the temporary rate increase payments until CMS formally approves the amended Appendix K. BMS will inform providers when this occurs.	Х	х	х

113	4/16/2021	PERS	Is there a list of approved vendors for the PERS?	BMS does not currently have a list of approved PERS vendors. As agencies identify vendors that meet policy requirements, the agencies are encouraged to share information so that BMS can make a list of approved PERS vendors available to all providers.	Х	х	х
112	4/16/2021	PERS	With PERS do the CM offer that or do the Homecare agency offer it to the member	CMS considers this a service and would be subject to conflict-free guidelines, therefore, PERS will be offered through the personal attendant agencies/PPL.	Х	х	х
111	4/16/2021	Training	How will we document the new required EVVand safety training? on the training record of course but the EVV training, is that the one that we have been using and providing for them there are several videos on these so which ones do we choose and give them	The EVV requirement is being removed. Agencies may be using another EVV system than HHAX so there would be no way to monitor this. The Safety training is for ADW only. It will be added to the training document form.	х	X EVV only	X EVV only
110	4/16/2021	EVV	If a third party EVV vender is used do we have to use hhx's training?	No. If you are not using HHAX's system you are not required to attend their training. BMS will be removing this annual training requirement from policy.	Х	х	х
109	4/16/2021	Case Management Qualifications	Can you provide guidance on "human services" field? Are the only certain degrees that can but used	The list of acceptable Human Services fields was projected on the screen during the meeting. BoSS will be emailing it to providers again as a handout on our next call.	Х	х	
108	4/16/2021	Member Enrollment	Can we get an update on the MEL?	Currently, slots are being released every Monday, so the Managed Enrollment List (MEL) is essentially non-existent right now.	Х		
107	4/16/2021	FAQs	Are the FAQ's on BMS's website?	The Q and A document has been posted on all three Web sites. It can be found under the Member/Provider Info tab.	Х	Х	х
106	4/16/2021	Member Enrollment	With SDM referral to a CM Agency, does the CMA apply for member enrollment by submitting the Member enrollment and the DHS2 that was conducted by the DHHR worker to Kepro?	Case Managers are no longer required to submit the Member Enrollment Request or complete the DHS-2 for new applicants. Kepro and DHHR are handling that process now. The MNER and DHS2 process does still apply for existing members.	х		

		Case	Is LPN considered for this CM position?	LPNs are licensed but do not have a degree therefore they			
105	4/16/2021	Management		do not meet the CM qualification for a 4 year degree.	Χ	Χ	
		Qualifications					
			Will members be able to remain on hold due	Yes, members can remain on Hold in CareConnection and			
			to fear of covid exposure without risk of being	go without paid services as long as agencies verify that			
104	4/16/2021	COVID-19	closed? If so, do we know how long?	their needs are being met by informal supports. This	Х	Х	х
	1, 10, 2021	COVID 13		exception will continue until six-months after the official	,,	٨	,
				end of the public health emergency. Services will be			
				phased back in at that time.			
			On the EVV app you select green if you	HHAX's training uses routine videos that show ALL the			
			completed the duty, red if the member	functions of their EVV system even though several of the			
			refused the duty and leave it blank if it wasn't	functions are not applicable to WV. We are not requiring			
103	4/2/2021	EVV	performed at all. If the member is usually an	the worker to enter duties (tasks they performed for the	Χ	Χ	Х
			assist with bath and they completed this on	member) in HHAX's system at this time. This function			
			their own without assistance that day what	may be implemented at a later date and training will be			
			would they select?	provided at that time.			
			Our agency is having many members coming	Workers that have not yet been uploaded to HHAX's			
			up unenrolled in Gainwell. I know this has	system are due to the time needed for Gainwell to			
			been reported but was not sure if anyone	process the agencies' bulk enrollment documents. Once			
			knew why this was happening and if provider	this is completed, the workers will be enrolled in			
			agencies need to do anything about it?	Gainwell's system and then uploaded to HHAX.			
				Inconsistencies with member data (missing members,			
102	4/2/2021	EVV		members being assigned to an agency even though the	Χ	Χ	Х
				member previously transferred from the agency,			
				duplicate authorizations for a member) are currently			
				being researched by HHAX, Kepro and BMS. If you have			
				not already done so, please notify BMS if you identify			
issues with the member data that	issues with the member data that has been uploaded to						
				HHAX's system.			

101	4/2/2021	EVV	verifying is with timesheets when the visit cannot be verified by EVV because of issues. If at this time, we are only to be clocking in/out,	Workers that successfully clock in/out of the EVV system will not be required to also complete a timesheet because the EVV system will capture all information that is on a timesheet. But, timesheets or other means of capturing the data will continue to be needed when a worker is unable to clock in/outi.e. worker not yet uploaded to HHA's system, worker forgot smart phone, etc. Having the worker document their services on a timesheet will provide the agency with the information needed to manually enter the worker's services in HHA's system. HHA's system includes the ability to enter the tasks/duties from the member's plan of care. Until further notice, the Personal Attendant Log (PAL) will continue to be required and workers will not be required to enter their duties in HHA's system. Once all agencies' workers are able to use the system for clocking in/out, we will consider implementing the duties function in the system. The PAL could then be discontinued since the information would be electronically captured in HHA's system.	X	X	X
100	4/2/2021	EVV	Do we need to enable -CAPTURE PATIENT SIGNATURE ON MOBILE APP in contract setup? Our videos show that as an example, and so far our workers don't have to have members sign to verify because we are using timesheets. Do you prefer us to leave it as is right now without signature?	HHAX's training uses standard videos that show ALL the functions of their EVV system even though several of the functions are not applicable to WV. We are not requiring the member to sign off each time the worker clocks out in HHA's system.	х	X	Х
99	4/2/2021	EVV	For those workers who will be using the HHAX		х	x	Х

98	4/2/2021	EVV	How do we bill for those clients/ homemakers who will be using a FOB? Will there be a modifier for that?	No, you will still use the regular service code regardless of how the worker clocks in/out of EVV. i.e. mobile app, member landline or FOB	Х	Х	х
97	3/19/2021	EVV	When will all members and employees be uploaded by Gainwell? We have MANY members missing.	There has not been an exact date shared with BMS as to when all information will be uploaded. Gainwell is working as quickly as they can. Should any additional information be available regarding a deadline, this date will be shared with providers.	Х	Х	Х
96	3/19/2021	EVV	Should the workers be placing the exact EVV time on their POC or should they be rounding to the time that is on the POC. Example: They arrive at 8:02 am and are scheduled for 8am. What time do they write on their POC and if the times do not match, will the RN be required to write a note?	EVV allows for a window of time in regard to arrivals. If it is a short amount of time and/or within the window of time, it will not be necessary to provide explanation. The worker would also need to document the actual arrival time.	х	х	x
95	3/19/2021	EVV	My understanding is that someone else in the agency office would set up the profile, data, etc. program the FOB. The agency office would train the personal attendant on how to use the FOB. The Case Manager would take the FOB to the home and would install it. Is this correct?	Until face-to-face visits by the Case Manager are reinstated, FOBs will not be installed in the members' homes. The installation of FOBs does require the device to be programmed with the Device ID that is specific to the member's profile. Training on this and the installation process will be provided to agencies prior to the implementation of FOBs.	х	х	х

94	3/19/2021	EVV	if we can add them. This delay is keeping our agency from starting EVV. According to the guidance letter our agency received, Gainwell enters the members however, our	Member, authorization and caregiver data from Gainwell's system is uploaded to HHAX's system. It is not necessary for agencies to manually enter the data. Gainwell's data includes both fee for service authorizations (ADW, TBIW, IDDDW and PC) as well as Managed Care Organization (MCO)authorizations (CSEDW). HHAX has been alerted that fee for service authorizations are incorrectly labeled as MCO authorizations and this is being corrected.	x	x	х
93	3/19/2021	EVV	Our agency has had several caregivers that have 2 clients in the same home that are having issues clocking out after clocking in to clock in with the second client.	Caregivers must clock out after providing services to the first member before being able to clock in to provide services to the second member. In cases where services are provided to two members living in the same home, it is recommended that the services be provided in separate blocks of time. i.e. 1st member served from 9:00 am to 12:00 pm and 2nd member served from 12:00 pm to 3:00 pm. This eliminates the need for the worker to clock in/out multiple times for each member. However, depending on the members' needs, it may be necessary for the worker to clock in/out more than once for each member.	x	x	х

92	3/19/2021	EVV	Our agency is having a lot of issues with the "GPS Signal Out of Range". When our agency contacted HHAX we were told that the "payor" needed to correct this issue. See HHAX comments below: Regarding the GPS tolerance increase, this is ruled by the payor and should not be adjusted on your end. Please coordinate with the payer to update the member's PIN location to allow your caregivers to clock in/out successfully with a good signal when using the mobile app.	Please contact BMS if a member's address is incorrect in HHAX's system and is creating problems when workers clock in/out of the system. BMS will update the member's address so that it is correct and consistent in HHAX, Gainwell and Kepro's systems.	х	x	X
91	3/19/2021	EVV	On the Patient Profile can we put the same phone number for more than one address? For example: For one of my members the address line 1 is incorrect (i.e., say it says 9 Elm St. when it should be 97 Elm St.). Our agency was told not to change address 1, therefore I added another line for address 2. We are assuming both addresses can have the same phone number.	You may enter the same phone number for more than one address but in this example, it is recommended that the phone number be associated with only the correct address that was manually entered. Please notify BMS of members that had incorrect addresses when uploaded to HHAX's system so that it can be corrected.	х	х	Х
90	3/19/2021	EVV	On the Patient Profile where it is checked EVV required, can we, or should, we unmark this if they have a live- in worker?	Agencies may un-check the EVV requirement in HHAX's system when the worker lives with the member and is not required to use EVV. However, this is not required.	Х	Х	х
89	3/19/2021	CFCM	How does CFCM apply to an agency that is currently providing ADW and PC services? Our agency was told it does not apply to the provider agency and that we could continue to provide both Waiver and PC services to a client if that is their choice. Our agency would like some verification of this.	An agency providing waiver PA services can also be a PC agency providing DCWs. It is the CM agency that cannot provide Waiver PA or PC DCW services along with CM services to the same member.	X	Х	

88	3/19/2021	EVV	Can we request to have an HHA Rep (like we do for Gainwell). This would be incredibly helpful.	HHAX has established Customer Service contacts specifically for WV. Please use the following: Phone: 866-983-4627 Pmail: Wvsupport@hhaeXchange.com	x	Х	х
87	3/19/2021	EVV	If utilizing a member's landline phone for EVV, under the member's address dropdown box what do we pick, GPS or Home?	You would need to select home. The landline would not have GPS capabilities so you would not select GPS.	х	Х	х
86	3/19/2021	EVV	Under member information do we need to pick a Coordinator or can we just use the Default? I would prefer not to use a specific person so that more than one person in the office would be able to perform this function.	Agencies may use the default. The optional Coordinator role is available so that agencies can assign members to specific Coordinators.	х	x	х
85	3/19/2021	EVV	Will the mobile app work on a Kindle Fire? Several homemakers are hesitant to install this app on their personal phones.	The mobile app is not compatible with a Kindle Fire or similar devices.	х	Х	х
84	3/19/2021	EVV	Does the agency RN need an NPI number in order to bill on the RN Member Contact Form? e.g. if the RN needs to make a home visit for follow-up on an incident resulting in a POC change.	RNs that bill nursing services through the PC and ADW programs are not required to use EVV. Therefore agencies do not need to obtain NPI numbers for RNs or enroll them with Gainwell.	x	x	х
83	3/19/2021	EVV	Can you please tell us the number that workers will be using to call in and out from a landline phone? I did not see it on a brochure.	Please see question #46. Each provider agency should already have been assigned an 800 number unique to their agency. Workers that use the mobile app to clock in/out will not be required to call in because the app captures all required information for the visit. Please contact HHAX if your agency has not yet received the toll-free number.	х	Х	х
82	3/19/2021	CFCM	When will Care Connection be updated to allow CM access to Personal Options Participants?	BMS has been working with Kepro to allow both the CM and PPL RC to have access to member data in the CareConnection. This should be available by April 1.	х	Х	

81	3/19/2021	CFCM	If ADW CMs will now be handling the transfers, what if a member or their family contacts PA agency requesting to transfer CM agency then they cannot handle this? It may be awkward for them to contact the current agency to assist with this.	Members have the right to choose service providers. If a member informs the PAA that he/she wants to transfer to a new CMA, the PAA can notify the CMA of the member's request. The CMA will then assist the member with the transfer. If there are extenuating circumstances that make it awkward for the PAA to notify the CMA of the member's request, the PAA may contact BoSS for assistance with the transfer.	х		
80	3/19/2021	EVV	In HHAX information provided, it is stating the Medicaid number for an individual needed to be 10 numbers when they are in fact 11.	Provider agencies are issued a 10 digit Medicaid provider number. Program members are issued an 11 digit Medicaid number. Both numbers are required in HHAX's system.	Χ	Х	х
79	3/19/2021	EVV	How fast will authorizations be uploaded to HHAX's system?	Authorization data from Gainwell is uploaded to HHAX's system each night. If you identified problems with your agency's authorizations in HHAX's system, please contact HHAX as soon as possible.	Χ	Х	х
78	3/19/2021	Authorizations	When can we expect to receive new auth #'s?	New authorizations which include the agency's NPI have been created and are effective 3/1/2021.	Х		Х
77	3/19/2021	Authorizations	Will ADW auths continue to change monthly?	ADW PA services will continue to have monthly authorizations. The only change to the authorizations is that they now include the provider agency's NPI number.	Х		
76	3/19/2021	Claims	Our agency rarely has to enter Auth #'s when billing, the Auths are already there, is this going to change?	Gainwell's system will attempt to "find" the appropriate authorization when an agency submits a claims that does not include the authorization number. Agencies are encouraged to enter authorization numbers on claims.	Х	х	х
75	3/19/2021	EVV	Do we only enter the member schedule and not their plan of care correct?	At this time, only the member's schedule is required to be entered into the system. Use of other functions in HHAX's system, including the member's plan of care, may be considered at a later date.	Х	х	х

74	3/19/2021	Claims	Our workers effective date is 3-2-21. This will cause an error for billing as 3-1-21 is the first billing date of the month.	If a worker's enrollment form for Gainwell was signed/dated 3/2/2021, it could cause claims with that worker's NPI for date of service 3/1/2021. Please contact	Х	х	х
				BMS if your agency has this issue.			
			Case management will not have to enter the	Currently the use of EVV for CMs have been placed on			
			NPI number of the Case Manager when billing	hold since home visits are not yet required due to COVID			
73	3/19/2021	EVV	through Gainwell?	restrictions. However, once your agency's CMs have been	Χ	Χ	
				enrolled in Gainwell's system, claims for CM services			
				should include the CM's NPI number.			
			Our Gainwell Rep told me that the portal was	As Gainwell continues to process agencies' bulk			
			not available yet to just use the bulk upload	enrollment documents, manually enrolling new hires in			
72	72 3/19/2021	should contact their Gainwell representativ when the manual enrollment process will b	Gainwell's portal may not be available. Each agency	Х	Х	х	
				should contact their Gainwell representative to determine		, 	
				when the manual enrollment process will become			
				available.			
			If using a FOB and you call into EVV, is that	That is correct. Each agency was provided with an 800			
			number the agency specific number that you	number specific to their agency. Those numbers have			
71	3/19/2021	EVV	also use for telephony method to record the	already been distributed so if you still do not have your	Х	Х	Х
			FOB number?	number, contact HHAX to obtain your number. FOBs have			
				been placed on hold since it requires installation.			
			Do we enter the workers visit when they turn	BMS has recommended provider agencies continue to use			
			in their timesheet to verify? This means we	their current timesheet process during the			
			won't be able to confirm their visit until a	implementation of EVV. If the process involves weekly			
70	70 3/19/2021	EVV	week later.	submission of timesheets, the agency would verify the	Х	Х	Х
				worker's visit after receiving the worker's timesheet.			
				Verification can be completed one week (or longer if			
				needed) after the visit occurred.			

69	3/19/2021	EVV	HHA has told me when the employees clock in and out, this will create the member schedule so you don't have to enter the schedule. Is this correct?	Member's schedules should be entered in HHAX's system prior to the worker clocking in/out. In some casessuch as when the member has a sudden change in needthe worker may be required to conduct a visit before the agency can adjust the schedule. When this happens, the agency can adjust the schedule to match the worker's actual clock in/out times. This should be done only when necessary.	Х	Х	Х
68	3/19/2021	EVV	Are the FAQ's on BOSS's or BMS's website?	FAQ's will be posted to BMS' website as soon as possible.	Х	Χ	Х
67	3/19/2021	Claims	Our agency has been advised by our Gainwell field rep that we can no longer span bill. We were informed that we would need to bill daily for the different workers. This has resulted in up to 21 lines of documentation to do billing for one participant for the month. What was once able to be completed in four hours is now taking 8 to 10 hours to bill.	Span billing can result in pended or denied claims and is not recommended. Once claims are processed through HHAX's system, the agency will not be required to create the daily claims for each worker's visits. If an agency is currently span billing and is unable to change to daily billing, please contact Randy Hill at BMS.	х	X	х
66	3/19/2021	EVV	What is the name of the EVV mobile app?	HHAeXchange Platform Mobile App	Χ	Х	Х
65	3/19/2021	EVV	What if there is an emergency (like the flooding and excessive snow) that causes cell towers and power to go out. How will the workers clock in and out with this system?	The mobile app allows workers to clock in/out even when in an area where there is no service. Following the visit when the worker returns to an area that does have service, the visit will automatically be uploaded to HHAX's system.	Х	Х	Х
64	3/19/2021	Rates	On the letter attached with our handouts regarding the \$0.25/ unit retroactive pay for COVID pandemic. Will agencies be receiving this going forward as well?	Per the letter, BMS requested an increment reimbursement during the period of the Presidential and Secretarial emergency declarations. The increase of \$0.25 is retro-active from July 2020 - December 2020. This \$0.25 increase is for this time period only. Claims submitted with a date of service during this time period will be paid or reprocessed to pay with this increment. No action is required on the providers' part.	X	X	х

60	3/5/2021	EVV	For Providers that manually submit claims, where on the claim are we supposed to enter the worker's NPI number?	For paper claims, the rendering provider (worker) will enter their NPI in block 24J and the agencies (pay to) NPI in block 33a of the CMS1500 claim form. The link to the CMS 1500 billing instructions is: CMS-1500 Miscellaneous Claim (wvmmis.com)	Х	Х	х
61	3/5/2021	EVV	staff each shift. So it would be same code, same day, and two different NPI's.	The scenario of two workers providing service to the same member on the same day is common, particularly in the IDDW program. With the implementation of EVV and the requirement for the worker's NPI number to be included on the claim, the agency will have to submit two claims for that date of service. One claim for the AM shift for hours billed by worker A and a second claim for PM hours billed by worker B.	Х	X	х
62	3/5/2021	Non-medical Transportation	Will the PA's NPI number be required when billing for the transportation/mileage code?	Non-medical transportation does not fall under EVV therefore the worker's NPI number is not required on claims for that service. If an agency would include the worker's NPI number on a transportation claim, it will not interfere with the processing and payment of the claim.	X	X	Х
63	3/5/2021	EVV	When we submit billing for members whose PA's live in the home and did not get a NPI number, will we use the modifier code in the spot where the NPI number goes? If so do you know when we will have access to that code?	ADW Personal Attendant claims for services provided by workers that live in the member's home are to be submitted with service code S5130 UK. The UK modifier will identify the claim is for a live-in worker that isn't required to use EVV or have an NPI number. Therefore, Gainwell will not require the worker's NPI number to be included on the claim. Other than adding the UK modifier to the service code, the agency will use their current (pre-March 1) process for submitting claims.	x		

59	3/5/2021	EVV	I have received conflicting information about agencies being required to enter workers' schedules in the EVV system. Please clarify.	It is necessary to create schedules in the EVV system so that the worker can be associated with the member. This allows the worker to clock in/out of the EVV system when providing services to the assigned member. However, there are times when a worker may be required to provide services at a different time than was planned/scheduled. In those cases, the worker will still be	X	X	x
				able to clock in/out but the agency administrator will be alerted of the unscheduled visit and have the opportunity to update the worker's schedule to match the actual time that services were provided.			
58	3/5/2021	EVV	On the tri-fold for our DCW's, it has Duty #, Duty, Category, what is this?	Duty code is a term used in the EVV system to identify the specific tasks performed by the workeri.e. (1) assistance with bathing, (2) assistance with meal preparation, etc. Currently, WV's EVV system does not require agencies to use this function.	Х	Х	х
57	3/5/2021	EVV	We were wanting to have meetings with our direct care staff to implement the EVV, will our members and workers be in our system by 3/15?	Gainwell continues to enroll workers that have been submitted by agencies through the bulk enrollment process. Please check HHAX's portal each day to determine if your agency's workers have been uploaded. Once the workers have been uploaded, you may create the workers' schedules and associate them with the member(s) they serve. Ideally, workers should be trained on the EVV system after their schedules have been entered.	х	x	х

56	3/5/2021	EVV	I read this was to eliminate timesheets, what about the log sheets that follow the care plan?	It will not be necessary for agencies to continue using timesheets for workers that clock in/out through EVV although some agencies may choose to continue to have workers complete timesheets. This is recommended at least during the first weeks of going live with EVV since workers will be learning the system and the timesheet can be a back-up if the worker is unable to clock in/out	х	X	x
				through the system. Documentation of the tasks completed by the worker (Plan of Care, Personal Attendant Log, etc.) will continue to be required.			
55	3/5/2021	EVV	EVV/GPS tracking – Is this being done while working as scheduled, just upon clock-in or clock-out or all the time if app is on private cell phone?	Location tracking only occurs when the worker is clocking in/out of the EVV system.	Х	Х	х
54	3/5/2021	EVV	Is there a time limit, or window of time, for the homemakers to clock in/out? Example: they are to start work at 9am. How early can they clock in before or after their scheduled work time/ end time and not be noncompliant?	HHAX's EVV system can be configured with a "tolerance window" which is the amount of time the worker is allowed to clock in/out for their scheduled visit with a member. For example, if a worker is scheduled to work at 9:00 a.m. and the tolerance window is set at 5 minutes, the worker could clock in 5 minutes before 9:00 a.m. or 5:00 minutes after 9:00 a.m. without the system identifying an error. The tolerance window does not prevent the worker from clocking in/out, but will alert the agency if the visit falls outside of the tolerance window. Currently, HHAX has not implemented the tolerance window function so that agencies can become familiar with scheduling and other functions of the EVV system.	X	X	Х

51	2/19/2021	Policy manuals		Agencies will be notified when the policy manuals are posted for the 30 day public comment period. This should occur within the next few days.	Х	Х	
52	3/5/2021	WV CARES	Will WV Cares be extending their deadline past March 1st, 2021 for fingerprint requirements?	Please refer to the WV CARES memo dated 2/26/2021. It states that the exception for fingerprinting will no longer be in effect after March 1. Employees hired on/after March 1 and existing workers that are due for their 5 year background checks will be required to be fingerprinted. New hires and existing workers that were not fingerprinted while the requirement was suspended will have until Sept. 30, 2021 to get printed.	х	х	Х
53	3/5/2021	Case Management	Last week on the call it was mentioned that Case Management would be doing the transfer of members. I wanted to ensure we are following the proper procedure. Currently we are completing the necessary paperwork and uploading in Kepro and then emailing the request as well. Are there any ancillary steps I may be missing?	Currently the Case Manager uploads the transfer form to Kepro's Careconnection which notifies BoSS of the request for transfer. Typically BoSS can quickly process the transfer but in some cases, it is difficult to find an agency to accept the referral. This is often due to the not available of workers that can meet the member's schedule or other needs. Effective April 1, the Case Manager will have a greater role in the transfer process. The Case Manager will continue to upload the form to the Careconnection but will be responsible for contacting the member's chosen agency and coordinating the transfer. This will be for all transfers including emergency transfers, Service Delivery Model transfers (Traditional/Personal Options), CMA transfers, PA transfers, involuntary agency closure transfers.	x		

50	2/19/2021	EVV	What if I entered my workers in both the HHA and Gainwell systems?	It is not necessary to enter workers in HHAX's system because once Gainwell has completed the bulk enrollment of the agency's workers, the worker data will be uploaded to HHAX's system. If an agency has manually entered workers in HHAX's system, there may be duplicates when HHAX uploads the workers from Gainwell's system OR the upload of the Gainwell worker data may delete the workers that were previously	х	X	х
49	2/19/2021	EVV	What if members don't show up in the system?	manually entered into HHAX's system. Gainwell is working diligently to process agencies' bulk enrollment documents. When possible, Gainwell is correcting errors identified in the bulk enrollment documents. Once the workers have been enrolled in Gainwell's system, the worker data will be uploaded into HHAXs system through electronic file exchange. Please monitor HHAX's system daily to determine if your agency's workers have been uploaded.	X	X	Х
48	2/19/2021	EVV	Some land lines are offered through AT&T using a modem. Will this work as a land line?	Landlines that operate through a modem will allow the worker to clock in/out using the agency's 800 number.	Х	Х	х
47	2/19/2021	EVV	If the client doesn't have a land line and the worker doesn't have a smart phone, can they call in to clock in/out?	In cases where the mobile app and landline are not options for the worker to clock in/out of the EVV system, a fixed object device (FOB) may be used. Due to COVID-19, FOBS cannot currently be installed in members' homes therefore workers in this situation will continue to document their time using the agencies' current methods (i.e. timesheet, PAL, etc.) Agencies will be required to manually enter the workers' visits into the EVV system.	х	x	х

	Ī		What number does the worker call to check	Workers that use the mobile app to clock in/out will not			
			in/out?	be required to call in because the app captures all			
			lin/out:				
4.0	2/40/2024	E) () (required information for the visit. HHAX has provided	v	v	
46	2/19/2021	EVV		each agency with a toll-free number to be used by	Х	Χ	X
				workers that must use the member's landline to clock			
				in/out. Please contact HHAX if your agency has not yet			
				received the toll-free number.			
			What do we do in situations where a worker	When a worker clocks in/out, the EVV system uses GPS to			
			lives in the same building as a member, but	verify the worker's present location and compares that			
45	2/19/2021	EVV	not with the member. How will this affect	location with the member's physical address. The	Х	Х	l x l
	_, _,,		clocking in/out?	worker's physical address is not verified so there is no	, ,	,,	, ,
				problem if the worker lives in the same building as the			
				member.			
			If there are errors on the bulk enrollment	Please do not manually enter workers in Gainwell's portal			
			documents submitted to Gainwell, should we	unless your Gainwell Field Representative has instructed			
			manually enter the workers in Gainwell's	you to do so. Gainwell continues to process the bulk			
44	2/19/2021	EVV	portal instead of waiting for the bulk	enrollment documents and is correcting errors when	Х	Χ	Х
			enrollment documents to be processed?	possible. Your Field Rep will notify the agency if it is			
				necessary to resubmit documents that contain errors that			
				they cannot correct.			
			If we can use the member's cell phone for EVV	The EVV mobile app must be downloaded to a smart			
			is the answer yes if a smart phone but no	phone or tablet in order for the worker to be able to be			
			if a flip phone?	able to clock in/out of the EVV system. The mobile app			
				uses GPS technology to verify the worker's location when			
42	2/40/2024	E) () (clocking in/out. Similarly, clocking in/out using a	v	v	
43	43 2/19/2021	EVV		member's landline verifies the worker's location. The	Х	Χ	X
				mobile app cannot be downloaded to regular cell phones			
				such as flip phones, Trac phones, etc., therefore these			
				phones cannot verify the worker's location.			
				process same verify the normal stronger			
				I			

42	2/19/2021	EVV	On Gainwell site, does the NPI# for the Case Manager go in the box (Referring Provider NPI)? Does Case Manager start billing with NPI# on 3/1/21?	Correctthe Case Manager's NPI number is to be entered on the claim in the Rendering Provider NPI box. Please do not enter the Case Manager's NPI (or PA/DCW worker's NPI) on the claim until you have confirmed that the worker has been enrolled in Gainwell's system.	Х	Х	
41	2/19/2021	Non-Medical Transportation	How will we bill for transportation-non medical after March 1	Effective 4/1/2021, the service code for ADW Traditional Non-Medical Transportation will be A0160 U5 and the rate will decrease to \$0.42 per mile. For dates of service prior to 4/1, agencies will continue to bill using the existing service code and rate.	Х		
40	2/19/2021	EVV	Most members use cell phones instead of land lines for their home phones. Can their phone still be used to make phone call?	It is not recommended that workers clock in/out using a member's smart phone. Using the mobile app on the worker's smart phone does not prevent the phone from being used to make phone calls, send texts or other functions.	x	X	х
39	2/19/2021	EVV	Our agency will need to use FOBs because some of our members don't have internet access at their homes.	The mobile app can be used even when the member's home does not have internet service. The worker can clock in/out through the app and later when the worker is in an area with internet service, the visit data will be transmitted to HHAX's system.	Х	Х	х
38	2/19/2021	EVV	If billing will be eventually be generated by HHAX's system, how will the Case Manager bill for services when they don't go to clients home for each service providedi.e. phone calls, correspondence, etc.	Due to COVID-19, Case Management services will not be billed through the EVV system until face-to-face home visits are reinstated. At that time, Case Managers will be required to use EVV only when conducting the required home visits with members.	Х	Х	
37	2/19/2021	EVV	How are agencies to handle situations such as a worker saying their phone storage is full and they cannot download the mobile app, the member doesn't have a landline and the member refuses to allow a FOB to be installed in the home?	When the mobile app and the member's landline are not options, the FOB will be required to be used. The FOB is a small device that can be installed in an inconspicuous location in the member's home. If a member refuses to allow the FOB to be installed it may impact the member's access to services. Please contact the BMS Program Manager regarding specific cases to discuss possible resolutions.	Х	X	X

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36	2/19/2021	EVV	When will we have access to participants and caregivers in HHA portal?	Gainwell is sending caregiver files to HHAX so that the enrolled workers will be uploaded to HHAX's system. The first file was sent 2/19/21 and the second file was sent on 2/23/21. HHAX will continue to send files throughout March as they process the agencies' bulk enrollment documents. Once that's completed, agencies will be entering workers directly in Gainwell's portal and Gainwell will begin sending a daily file to HHAX. This means that you should see the worker in HHAX's system the day after you enter the worker in Gainwell's portal.	x	x	x
35	2/19/2021	EVV	Are only the caregivers using the EVV going to be generated through HHA exchange straight to Gainwell? The other caregivers will be billed through the Gainwell site directly?	Only caregivers that are required to use EVV are required to be enrolled in Gainwell's system. Once enrolled in Gainwell's system, the Caregivers will be uploaded into HHAX's system. As these workers clock in/out of the EVV system, HHAX will generate the claims to Gainwell. The claiming function of HHAX's system will be phased in at a later date. Until then, agencies will continue to submit claims to Gainwell using their current claiming process. Once HHAX's claiming function is implemented, agencies will be required to process claims only for workers that do not use the EVV system.	x	x	х
34	2/19/2021	EVV	Is Kepro going away since we are entering patients into the HHA? Are we accepting/How are POC entered into the system?	Kepro will continue to authorize services for the ADW, TBIW and PC programs as well as performing all other current functions including enrollment of new members and member referrals to agencies. Agencies will continue to use Kepro's Careconnection to accept referrals, upload required documentation and other current requirements. Member and authorization data will be uploaded to HHAX's system through electronic file exchange.	х	x	х

33	2/19/2021	EVV	Are both the 3/22 and 3/23 dates required for ADW policy manual training? Or, do we attend one or the other?	You will only need to attend one date for the ADW training. TBI has only one date.	х	Х	
32	2/19/2021	EVV		A caregiver may use more than one phone but the mobile app will need to be downloaded to each phone.	Х	Х	x
31	2/5/2021	WV CARES	Does the WV CARES system now require agencies to screen workers for the DHHR Protective Services Registry	DHHR Protective Services Registry screening is not required by ADW, TBIW or PC policy. The WV CARES system recently added the option to screen workers against this registry but it is not required.	X	Х	х
30	2/5/2021	COVID-19	When will RNs be required to resume completing assessments in the member's home?	This will depend on the date the national public health emergency is ended. Face-to-face assessments will not be mandated until at least October 2021. Currently, agencies and members have the option of completing face-to-face assessments but due to COVID, agencies are encouraged to continue doing assessments virtually.	X		х
29	2/5/2021	COVID-19	Will online CPR continue to be allowed after 3/31/2021?	Yes. Preventative measures currently in place through Appendix K will be extended for up to six months following the end of the national public health emergency (PHE). Currently the public health emergency is in place until April, 2021 therefore Appendix K measures, including online CPR will be allowed until October 2021	Х	Х	х
28	2/5/2021	CFCM	Is the Conflict Free CM still going to be effective 4/1/21?	The implementation of CFCM for existing/active members has been delayed until further notice. New members and members that voluntarily request transfers will be required to choose conflict-free agencies beginning 4/1/2021.	Х	Х	
27	2/5/2021	EVV	Do nurses need NPI numbers?	Nurses need NPI numbers only if they will be providing Case Management or Personal Attendant/Direct-Care services.	X		Х

26	2/5/2021	EVV	Authorizations on claims for ADW S5130 services are currently not required on actual claims presently with Gainwell as they are pulled in by Gainwell. Will we be required to have an authorization number on all claims along with the NPI number of the prior authorization or will the authorization number pull internally within the Gainwell claim processing system?	Kepro is currently creating agency-specific authorizations for ADW Personal Attendant and PC Direct-Care services. These new authorizations will replace the existing authorizations and at that time, the prior authorization number will be required on the agencies' claims. This will be automatically done once the claiming function of HHAX's system is implemented. BMS will provide training on the new prior authorizations on 3/5/2021	х		
25	2/5/2021	EVV	Is entering the member's schedule into EVV required?	HHAX's system does require agencies to enter the worker's schedule. The worker can clock in/out of the EVV system on dates/times that have not been scheduled but the agency will need to update the worker's schedule in the system after the visit has occurred.	x	X	х
24	2/5/2021	EVV	Will the caregivers need to know their NPI numbers or is that just for the agency to use for billing?	Agencies that obtained NPI numbers on behalf of their workers should provide the NPI number to the worker. But, the workers' NPI numbers are primarily for the agency's use when enrolling workers in Gainwell's system and for tracking purposes in HHAX's system.	x	x	х
23	2/5/2021	EVV	Is there a list that can be printed or issued with the different modifiers and what is the effective date of their use?	During the provider Zoom meeting on 3/5/2021, BMS will provide training on the use of the UK modifier for live-in workers. Service codes with the UK modifier will not become available until 4/1/2021.	Х	Х	х
22	2/5/2021	EVV	Will we be filling out paper timesheets and doing EVV? If so, for how long? It was my understanding EVV was to replace paper timesheets.	EVV will ultimately eliminate the need for paper timesheets. The EVV system goes live on March 1st but agencies will continue to use their current billing processes, including timesheets until all workers are enrolled in Gainwell's system and all agencies are able to fully utilize the EVV system.	х	х	х

21	2/5/2021	EVV	It would be more efficient to our agency to be able to Direct Data Entry our new workers.	New workers can currently be directly enrolled in Gainwell's portal. Please contact your agency's Gainwell Field Representative prior to enrolling workers in the portal. Workers that have been enrolled in Gainwell's portal through the bulk enrollment process or through manual portal entry will be uploaded to HHAX's system through a file exchange beginning 2/22/2021. It is not necessary to manually enter workers in HHAX's system.	X	X	х
20	2/5/2021	EVV	When do agencies begin billing with the UK service code modifier for live-in workers?	Effective 4/1/2021, agencies will begin using the UK modifier on service claims for workers that live in the member's home.	Х	Х	х
19	2/5/2021	EVV	For workers that use mobile app on their phones, will there be an increase in data use in case they have prepaid phone with limited minutes?	The Mobile App can be used on Wi-Fi, so that it does not affect data usage. If the member does not have Wi-Fi in the home there is an offline mode for the app where the worker can clock in/out, and when they return to Wi-Fi they can transmit their timestamps.	х	Х	х
18	2/5/2021	EVV	Since billing will not yet go through the HHAX system is span billing not yet being eliminated for those services subject to EVV effective March 1?	Span billing will remain available after March 1st for services that are tracked through EVV. Agencies may continue to use their current billing process, including span billing until future notice.	х	Х	х
17	2/5/2021	EVV	Will workers be able to clock in and out if the member only has a cell phone in the home.	Cell phones are not able to be used for the telephony method. However, if it is a smartphone, and the member allows it, the worker could use the Mobile App on the member's phone.	х	Х	х

16	2/5/2021	EVV	What if our workers are not active by March 1 for billing, mine still says submitted and new not enrolled	Although HHAX's EVV system goes live on 3/1/2021, agencies will continue to use their current billing process for submitting claims. Claims for services provided by workers that are not yet enrolled in Gainwell's system will be processed and paid. During March, Gainwell's system will alert agencies when claims do not include required information such as the worker's NPI or when the worker is not enrolled. At a later date, this missing information may result in the claim being denied.	Х	X	×
15	2/5/2021	EVV	I believe I heard last call to upload any new hires through the bulk upload sheets for Gainwell through 3/1. After that the portal is to be used for enrolling workers in Gainwell's system?	Gainwell plans to discontinue the bulk enrollment (spreadsheet) process on 3/1/2021. Agencies still needing to submit bulk enrollment documents after that date are to contact their Gainwell field representative to make arrangements.	Х	х	X
14	2/5/2021	EVV	What number do the workers call for Gainwell	Workers using EVV will not be required to contact Gainwell. HHAX will provide each agency with a toll free number that workers may use to clock in/out using the member's landline. Most workers will instead use the mobile app to clock in/out through a smart phone. Use of the mobile app will not require the worker to call in to the agency's toll free number.	х	Х	>
13	2/5/2021	EVV	Will we be able to see in EVV what time our workers showed up and left in March when we're still billing through Gainwell in case they are being dishonest on their PALS?	Yes, HHAX's system will allow agencies to view each worker's EVV information including the time they clock in, clock out, location of service, etc. Agencies will be able to correct information in HHAX's system if it doesn't match the worker's PAL or other documentation.	х	x	>

12	2/5/2021	EVV	Has anyone been informed how to enroll direct care providers to Gainwell without the "middle man"? The spreadsheet to gain well is my middle man	Gainwell's bulk enrollment process (spreadsheet) allows agencies to enroll existing workers in batches rather than manually enrolling workers individually in Gainwell's portal. Gainwell has provided web-based training on the process for individually enrolling workers in their portal. Agencies may contact Gainwell to request this training and related instructional materials.	х	X	х
11	2/5/2021	EVV	Is there equipment we need (FOB etc.)or will there just be a phone number for the workers to call in to?	There are several methods for caregivers to clock in/out of EVV if using the HHA free EVV tools. Caregivers can use the member's landline to clock in/out via telephony. Using this method, the caregiver will call into the phone number assigned by HHAX to the agency. Caregivers may also use the Caregiver Mobile App as a GPS method of clocking in/out, or they can use a FOB device. Information will be forthcoming regarding the FOB, but telephony and the mobile app are the preferred methods.	x	X	х
10	2/5/2021	EVV	Will NPI numbers for Case Management services be required in Gainwell on March 1 as well?	Case Management services will not be required to be entered in HHAX's system until it is safe for Case Managers to resume face-to-face home visits with members. Effective 3/1/2021, claims submitted to Gainwell for Case Management services will be required to include the Case Manager's NPI number.	X	х	
9	2/5/2021	EVV	Will we be billing CM and direct-care workers that use the EVV system through HHA and then the workers that live in the member's home and services that don't require EVV will be billed through Gainwell?	After HHAX's EVV system goes live on March 1st, agencies will continue to submit all claims for services to Gainwell using the agencies' current billing process. At a later date, HHAX's system will create the claims for services that are entered by direct-care workers and Case Managers in the EVV system. Agencies will be informed in advance and provided additional training on the claiming function in HHAX's system.	X	X	

8	2/5/2021	EVV	It has been said that Live-in home care workers do not need NPI numbers. How will that affect billing if we need to put an NPI number when completing billing?	When submitting claims for services provided by live-in workers, agencies will add a "UK" modifier to the service code on the claim. This will distinguish the live-in worker claims from claims for workers that do not live with the member. Claims with the UK modifier will not require the worker's NPI number. But, if the agency does include the worker's NPI number on a claim with the UK modifier, it will not prevent the claim from being paid.	Х	X	x
7	2/5/2021	EVV	the webinars next week or can we wait until closer to the time for this to be implemented for CM?	Case Management agencies are welcome to complete the training now but the trainings will also be offered in advance of EVV for Case Management going live. Agencies will be notified at least 3 months prior to the golive date for Case Managers being required to use EVV.	Х	x	
6	2/5/2021	EVV	How will T1001 and T1002 be billed for the RN without the NPI?	T1001 and T1002 are not in scope for EVV. Nurses providing these services are not required to have NPI numbers or use EVV. Claims for these services will be submitted using the agency's current billing process.	×		
5	2/5/2021	EVV	Will billing with the employee NPI numbers be required on March 1st or will it be delayed?	Effective 3/1/2021, NPI numbers are to be included on claims for services provided by workers that are required to use EVV. During the month of March, claims submitted will be processed and paid (if there are no other issues with the claim) but Gainwell will issue a warning regarding the missing NPI number. Once the EVV system is in full operation, the warning will be eliminated and claims without the required NPI number will be denied.	х	x	х
4	2/5/2021	EVV	After EVV goes live will we bill through Gainwell or through HHAX?	HHA's EVV system will go live on 3/1/2021 but providers will continue to submit claims through Gainwell using their current billing processes. The claiming function of HHAX's system will be phased in at a later date.	Х	х	х

3	2/5/2021	EVV	Can HHA slides from today's presentation be shared?	All training materials are available under the Training tab on HHAX's website: https://hhaexchange.com/wv/ The slides from this presentation were also emailed to agencies.	Х	Х	х
2	2/5/2021	EVV	How do we register for HHAX webinars?	Information regarding HHAX webinars will be sent to each agency's contact person. You may also obtain this information through the Provider Information Center on HHAX's website: https://hhaexchange.com/wv/	Х	Х	х
1	2/5/2021	EVV	Our agency has not yet received a welcome packet or other materials from HHAX. How do we get this information?	Please contact HHAX to confirm that you have submitted your provider survey. The information in the survey is what triggers the welcome packet and other enrollment information to be sent to the agency contact person identified in your survey.	Х	Х	х